

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Blue Cross Blue Shield of Michigan PAC

ADDRESS (number and street)

232 S. Capitol

MC L10A

☐ Check if different than previously reported. (ACC)

Lansing

MI

48933

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00084061

3. IS THIS REPORT

NEW (N)

OR

☒ AMENDED (A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☒ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
04 01 2014

through

M M M / D D D / Y Y Y Y Y Y  
06 30 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mark Cook

Signature of Treasurer

Mark Cook

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
09 10 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
OnlyFEC FORM 3X  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Blue Cross Blue Shield of Michigan PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
04		01		2014

To:

M M	/	D D	/	Y Y Y Y Y
06		30		2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y 2014</span>		<span style="border: 1px solid black; padding: 2px;">360637.74</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">384366.92</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">168893.99</span>	<span style="border: 1px solid black; padding: 2px;">310234.93</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">553260.91</span>	<span style="border: 1px solid black; padding: 2px;">670872.67</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">165008.46</span>	<span style="border: 1px solid black; padding: 2px;">282620.22</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">388252.45</span>	<span style="border: 1px solid black; padding: 2px;">388252.45</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Blue Cross Blue Shield of Michigan PAC

Report Covering the Period:

From:

 M M / D D / Y Y Y Y  
 04 / 01 / 2014

To:

 M M / D D / Y Y Y Y  
 06 / 30 / 2014
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

97038.00

121407.00

(ii) Unitemized .....

63257.96

180128.20

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

160295.96

301535.20

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

160295.96

301535.20

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

8500.00

8500.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

98.03

199.73

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

168893.99

310234.93

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

168893.99

310234.93

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	55.59
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	55.59
22. Transfers to Affiliated/Other Party Committees.....	25000.00	25000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	37500.00	65000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	102508.46	192564.63
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	165008.46	282620.22
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	165008.46	282620.22

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	160295.96	301535.20
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	160295.96	301535.20
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	0.00	55.59
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	0.00	55.59

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Susan Barkell**

Mailing Address 8171 Brookville Rd

City  
Plymouth

State  
MI

Zip Code  
48170-5005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

SVP Health Care Value

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

06 / 26 / 2014

Transaction ID : AF043A8D780594579904

Amount of Each Receipt this Period

420.00

Payroll Deduction: \$60.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Carl Siebers**

Mailing Address 6563 W Via Vista Ct NE

City  
Rockford

State  
MI

Zip Code  
49341-8778

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

VP Claims Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

06 / 26 / 2014

Transaction ID : A69D910BFB95F4E35BCF

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Michael Benoit**

Mailing Address 34921 25 Mile Road

City  
Chesterfield

State  
MI

Zip Code  
48047-2746

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

Transaction ID : A1F15EEA3211E403198D

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

938.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Thomas Simmer**

Mailing Address 4975 S Ridgeside Circle

City

Ann Arbor

State

MI

Zip Code

48105-9447

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Svp & Chief Medical Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A62FDAE284FC24BBE8E5**

Amount of Each Receipt this Period

420.00

Payroll Deduction: \$60.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Curtis Schoenjahn**

Mailing Address 3660 Seney Dr

City

Lake Orion

State

MI

Zip Code

48360-2706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A8BC8684059B24994935**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Bruce Henderson**

Mailing Address 14007 Kahla Drive

City

Belleville

State

MI

Zip Code

48111-1039

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Attorney Senior

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A43DE40EE94D7462483F**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

826.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Marissa Ebersole-Wood**

Mailing Address 6218 Valleyfield Dr

City  
Plymouth

State  
MI

Zip Code  
48170-7620

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A03DD2EA060994B518DB**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Janet Jennings**

Mailing Address 8120 E. Jefferson  
#7d

City  
Detroit

State  
MI

Zip Code  
48214-2665

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Dir Medical Informatics

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A19C68DD4CAAB4FF9A62**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Brian Armstrong**

Mailing Address 1363 North Creek Dr

City  
Wixom

State  
MI

Zip Code  
48393-1638

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

VP Sales Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AE7C1192E8A1A41C2918**

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

721.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Tonya Byers**

Mailing Address 10331 Dartmouth

City

Oak Park

State

MI

Zip Code

48237-1705

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A56AEBEDEC6204201B5D**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Michelle Silvaggi**

Mailing Address 140 Winclare Dr

City

Tecumseh

State

ON

Zip Code

N8P 1-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A3E58C8AD63F04B0A9AB**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Adam Gnesin**

Mailing Address 5669 Walnut Ridge Court

City

West Bloomfield

State

MI

Zip Code

48322-2089

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AF43BD389FE8341F7979**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

609.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

## **A. Duane DiFranco**

Mailing Address 11817 Hunters Creek Ct

City State Zip Code  
Plymouth Township MI 48170-2822

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Sr Medical Director BCN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

Transaction ID : A6ADE4152E42241AAA4D

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **B. Todd Anderson**

Mailing Address 10653 Corkery Ln

City State Zip Code  
Grand Ledge MI 48837-9522

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

Transaction ID : A251837396B36464F8BC

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **C. Bart Feinbaum**

Mailing Address 5198 Shenandoah Ct

City State Zip Code  
West Bloomfield MI 48323-2343

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Attorney Senior

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

Transaction ID : AF58FC646A4F1438DAB7

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

609.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Angela Bullock**

Mailing Address 17547 Parkside Street

City State Zip Code  
 Detroit MI 48221-2716

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

Transaction ID : AA0D4212D8D744292A64

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Jeffrey Denhard**

Mailing Address 1256 Lamb Dr

City State Zip Code  
 Troy MI 48085-4957

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Dir Bus Configuration

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

Transaction ID : AF1E9A4D010DD410A9B6

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Matthew Case**

Mailing Address 9370 Big Hand Rd

City State Zip Code  
 Columbus MI 48063-3013

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Attorney Senior

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

Transaction ID : A790174C47FF945AFABB

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

609.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

A. Patrick Prichard

Mailing Address 4315 Shady Hill Lane

City State Zip Code  
 Lansing MI 48917-1661

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Dir West MI UP &amp; Rgnl Vis

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A3CAFCEC653B34A0C8FF

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. Kirk Vogelei

Mailing Address 1304 Kinlock

City State Zip Code  
 Troy MI 48098-2041

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : AA40ACB91BCB6420799A

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. Luzine Brister

Mailing Address 17145 Strathmoor

City State Zip Code  
 Detroit MI 48235-3919

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A913D3D0AB03F458C9BF

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶

609.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Daniel Loepp**

Mailing Address 582 Pierce St

City

Birmingham

State

MI

Zip Code

48009-1752

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A1CCC548620EC4142A4F**

Amount of Each Receipt this Period

420.00

Payroll Deduction: \$60.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. James Mills**

Mailing Address 37753 Chase Ct

City

Livonia

State

MI

Zip Code

48150-5040

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : ACFB272383D2943B89D3**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Orin Lewis**

Mailing Address 5827 Applewood  
Apt 802

City

West Bloomfield

State

MI

Zip Code

48322-3479

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A614B4CC598F046888ED**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

826.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Gina Lynem-Walker**

Mailing Address 7043 Alta Vista Dr

City

West Bloomfield

State

MI

Zip Code

48322-2772

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Physician Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A7A51238D742E4D988AB**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Joanne Topa**

Mailing Address 4944 Lagoons Circle

City

West Bloomfield

State

MI

Zip Code

48323-2046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

Director, Entrprs Applications

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A4E03719A41E7489EB98**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Elizabeth Irick**

Mailing Address 703 N Highland St

City

Dearborn

State

MI

Zip Code

48128-1654

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2E6D0DBF6A134BA9BB6**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

609.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Gregory Mays**

Mailing Address 33865 Trillium Court

City State Zip Code  
 Livonia MI 48150-3685

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director - Regional Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 06 26 2014

Transaction ID : AD56BA3575629404FB70

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Janet Fava**

Mailing Address 1094 Whisper Way Ct

City State Zip Code  
 Troy MI 48098-4419

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 06 26 2014

Transaction ID : AD63410ACB31E40E78D1

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Elizabeth Geis**

Mailing Address 1392 Ludean

City State Zip Code  
 Highland MI 48356-1168

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 06 26 2014

Transaction ID : A9379FDF3B1FE404E888

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

609.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 16 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

## **A. Rodester Begosa**

Mailing Address 34270 Trillium Court

City Livonia State MI Zip Code 48150-3689

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director - Regional Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

Transaction ID : A5C50E20BBF2C4CC6B48

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **B. Daniel Martin**

Mailing Address 1447 W Hazelhurst St

City Ferndale State MI Zip Code 48220-3121

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Dir Provider Outreach

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

06 / 26 / 2014

Transaction ID : ADBC352B978F1462E895

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **C. Ronald Berry**

Mailing Address 1043 Woods Ln

City Grosse Pointe Woods State MI Zip Code 48236-1156

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

VP Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

06 / 26 / 2014

Transaction ID : A41F3D48434B44883947

Amount of Each Receipt this Period

420.00

Payroll Deduction: \$60.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

938.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 17 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Susan Kluge**

Mailing Address 10795 Stoney Point Dr

City

South Lyon

State

MI

Zip Code

48178-9820

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Svp & CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AAF94C0EE9E5F449C9D0**

Amount of Each Receipt this Period

420.00

Payroll Deduction: \$60.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Seetharaman Santhanam**

Mailing Address 15825 Spyglass Dr

City

Northville

State

MI

Zip Code

48168-8484

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2880A3D0E6B84ECEBF7**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Matthew Thibadeau**

Mailing Address 44486 Copland Lane

City

Novi

State

MI

Zip Code

48375-1574

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Dir - Perform Transform

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A7E1CD4D9EB404677A05**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

826.00

**SCHEDULE A (FEC Form 3X)****ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 202

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Gregory Anderson**

Mailing Address 37161 Chesapeake

City

State

Zip Code

Frmgtm Hls

MI

48335-1142

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Blue Cross Blue Shield of Michigan

VP Corp &amp; Financial Invst

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	6			2	0	1	4		

**Transaction ID : A3BC5BF3E8E6C46CABE1**

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. James Hashman II**

Mailing Address 48073 Hull Rd

City

State

Zip Code

Belleville

MI

48111-2520

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Blue Cross Blue Shield of Michigan

Dir Sales Force Development

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	7			2	0	1	4		

**Transaction ID : AC3FD33B12AEF48DA9D7**

Amount of Each Receipt this Period

58.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Carmi Edwards Jr**

Mailing Address 1173 Tartan Ln

City

State

Zip Code

Walled Lake

MI

48390-2285

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Blue Cross Blue Shield of Michigan

Director

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	6			2	0	1	4		

**Transaction ID : A779358F93AE449E98FE**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

576.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Janet Macqueen**

Mailing Address 3214 Chesapeake Dr

City State Zip Code  
 Strlng Hts MI 48314-1869

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

VP Chief Info Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 06 26 2014

Transaction ID : AA279A640B7E240ACB28

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Patricia Snyder**

Mailing Address 17175 Tall Pines Ct

City State Zip Code  
 Northville MI 48168-1883

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 06 26 2014

Transaction ID : AD85D4E1D42914FD5B85

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Gail Ross**Mailing Address 322 E Harrison Ave  
Unit 26

City State Zip Code  
 Royal Oak MI 48067-3284

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

VP Customer Service

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 06 26 2014

Transaction ID : AE1B3E62CC078489FB63

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

833.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

A. Aaron Turner

Mailing Address 2499 Hamilton Ave.

City State Zip Code  
 Berkley MI 48072-1729

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A0B7C3CEBA10B4FD7875

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. Pamela Braund

Mailing Address 1407 Glenview Dr

City State Zip Code  
 Waterford MI 48327-3726

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : AA906BB2AF5F24AF2827

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. Michael Andreshak

Mailing Address 2719 Broadmoor Dr

City State Zip Code  
 Rochester Hills MI 48309-1350

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A410D2EDAD52E4242B24

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

609.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

A. Cindy Monroe

Mailing Address 320 Hamilton Rd

City

Bloomfield Hills

State

MI

Zip Code

48301-2544

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

VP Corporate Strategy

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : ACCC9091E1E44461996A

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. Robert Galac

Mailing Address 693 Bolinger

City

Rchstr Hls

State

MI

Zip Code

48307-2820

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A59101D8650734566AAE

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. Greg Vartanoff

Mailing Address 22359 Woodstock Ct

City

Woodhaven

State

MI

Zip Code

48183-3116

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A1A06F9DAD7D749469DB

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

721.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 22 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Paul Mozak**

Mailing Address 21174 Bridle Run

City  
Northville

State  
MI

Zip Code  
48167-3792

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

VP Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A78D1EEFF14BC4AF1AD8**

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Lisa Hardy**

Mailing Address 1705 Brian Ct

City  
Ann Arbor

State  
MI

Zip Code  
48104-4267

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

VP Corp Perform & Admin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A93E7EB46354A4322803**

Amount of Each Receipt this Period

210.00

Payroll Deduction: \$30.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Roy Nesler**

Mailing Address 47417 Glengarry Blvd

City  
Canton

State  
MI

Zip Code  
48188-6269

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Dir - Payroll Svcs & HRIS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A86590EE5EA4943C6BD7**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

728.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 23 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

## **A. Kenneth Dallafior**

Mailing Address 4529 Oak Pointe Dr

City State Zip Code  
 Brighton MI 48116-9780

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 EVP Commercial Business

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

06 / 26 / 2014

Transaction ID : A0B01D94393D24F86A07

Amount of Each Receipt this Period

420.00

Payroll Deduction: \$60.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **B. Robert Crawford**

Mailing Address 1413 Morton Ave

City State Zip Code  
 Ann Arbor MI 48104-4436

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

Transaction ID : A4491AE83FF014600A01

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **C. James Bridges**

Mailing Address 33654 Yorkridge St

City State Zip Code  
 Farmington Hills MI 48331-1547

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Medical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

06 / 26 / 2014

Transaction ID : A8B0B3C9B25A048059F1

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

938.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 24 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Thomas Ruane**

Mailing Address 26509 Old Homestead Ct

City

Farmington Hills

State

MI

Zip Code

48331-3851

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A88BAED196446468792E**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Michael Haddad**

Mailing Address 21448 Mackenzie Drive

City

Macomb

State

MI

Zip Code

48044-1327

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AE42F35374F5644EA824**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Annette Sabatella**

Mailing Address 411 Saddle Lane

City

Grs Pt Wds

State

MI

Zip Code

48236-2728

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A550E8D04E6354162991**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

609.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 25 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

## **A. Raymond O'Reilly**

Mailing Address 25506 Stanley Ln

City

South Lyon

State

MI

Zip Code

48178-8195

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : ADA27ABDC1F314B99817**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **B. Michael Troup**

Mailing Address 16022 Brook Trout Ln

City

Northville

State

MI

Zip Code

48168-8593

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Dir IBU Risk Sustainability

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A8676BAC1A60F4CA3A2D**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **C. Sue Jenkins**

Mailing Address 6332 Lake Drive

City

Haslett

State

MI

Zip Code

48840-8930

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A4E1DF30235C147FAC4**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

609.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 26 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Bonnie Harrington**

Mailing Address 3468 Shaddick

City

Waterford

State

MI

Zip Code

48328-2560

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A6C4892B24A6E4AB0B24**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Teresa Bueche**

Mailing Address 621 Scottview CT NE

City

Comstock Park

State

MI

Zip Code

49321-9644

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AFDE1490377C54AB782F**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Diane Wolfenden**

Mailing Address 34397 Orsini Dr.

City

Sterling Heights

State

MI

Zip Code

48312-5773

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Dir URMBS Auto Act

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AF2BF1CFF802B47BB993**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

609.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

A. Suzanne Miller Allen

Mailing Address 526 Washington St

City

Traverse City

State

MI

Zip Code

49686-2644

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A3F8087B67C59449F90F

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. Thomas Leyden

Mailing Address 48808 Meadow Dr

City

Plymouth

State

MI

Zip Code

48170-3260

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A4DFBB8EEDA1C4E6A901

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. Julie Maier

Mailing Address 6061 Middle Lake Rd

City

Clarkston

State

MI

Zip Code

48346-2047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : ADF8BC9CB5D9341E7B82

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

609.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

A. John Dunn

Mailing Address 3153 Davenport

City

Rochester Hills

State

MI

Zip Code

48309-4283

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

VP Middle &amp; Small Grp Busns

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A07C34AFC50884929836

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. Mark Cook

Mailing Address 1121 Lone Oak Dr

City

Mason

State

MI

Zip Code

48854-8714

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

VP Governmental Affairs

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : AA89A8A34077B4F7893A

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. Helen Stojic

Mailing Address 28 Elm Park Blvd

City

Plsnt Rdg

State

MI

Zip Code

48069-1105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A5C619155D2C3420AB9E

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

833.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 29 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Mark Bartlett**

Mailing Address 49546 Hollywood Dr

City

State

Zip Code

Canton

MI

48187-1162

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Blue Cross Blue Shield of Michigan

Evp CFO & Pres Emerg Mkts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A6D66E5E8E28E400AA45**

Amount of Each Receipt this Period

420.00

Payroll Deduction: \$60.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Kathryn Levine**

Mailing Address 1788 Pierce

City

State

Zip Code

Birmingham

MI

48009-2056

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Blue Cross Blue Shield of Michigan

VP Corp Mkting & Cust Experien

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AF26AE5DCC7FC4E9E872**

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Keith Adkins**

Mailing Address 4371 Fieldview

City

State

Zip Code

Grand Ledge

MI

48837-8191

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Accident Fund Insurance Company of Ame

VP, Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AA48A5436C27146F5AE1**

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1050.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Stephen Kellar**

Mailing Address 23268 Mystic Frst

City State Zip Code  
Novi MI 48375-4013

FEC ID number of contributing federal political committee.

C

Name of Employer  
Accident Fund Insurance Company of Ame

Occupation  
VP & CFO Lifesecure

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 26 2014

Transaction ID : AFF34614EFF834773A5A

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Katherine Vern**

Mailing Address 516 Lakepointe

City State Zip Code  
Grosse Pointe Park MI 48230-1702

FEC ID number of contributing federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 26 2014

Transaction ID : AD65BD4753AAA4F90956

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Regina Jamerson**

Mailing Address 6875 Chase Court

City State Zip Code  
W Bloomfield MI 48322-3292

FEC ID number of contributing federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Director - Regional Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 26 2014

Transaction ID : AC0B5797B59F14BA39F6

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

721.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

A. Richard Theisen

Mailing Address 23250 Cheltenham Ln

City

State

Zip Code

Dearbn Hts

MI

48127-2365

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Blue Cross Blue Shield of Michigan

Attorney Senior

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A5438D135E0AE41B9AFF

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. Pamela Yanis

Mailing Address 905 Blairmoor Ct

City

State

Zip Code

Grs Pt Wds

MI

48236-1244

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Blue Cross Blue Shield of Michigan

Director II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : AA6F9E0E40C31403BBE6

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

c. Mary Smith

Mailing Address 10058 King Rd

City

State

Zip Code

Davisburg

MI

48350-1900

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Blue Cross Blue Shield of Michigan

VP HCV Ctr of Excellence

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A393CE04D8EA74C058AC

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

721.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 32 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Kenneth Krisan**

Mailing Address 1870 Woodside Cir

City

Commerce Township

State

MI

Zip Code

48390-3922

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A9BCD3E6798144EFA9BB**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Joanne Rusch**

Mailing Address 4171 Fallow

City

W Blmfl

State

MI

Zip Code

48323-1242

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A0865F7C2D1B743AD948**

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Linda Oliver**

Mailing Address 28067 New Bedford Dr

City

Farmington Hills

State

MI

Zip Code

48334-3220

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A0AF724D40A5244F0ADB**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

721.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 33 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Stephen Anderson**

Mailing Address 499 Catalpa Dr

City

Birmingham

State

MI

Zip Code

48009-1714

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

VP Prov Contr & Ntwk Admin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A3599E05EE90942BEAA4**

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Kerilyn Kittmann**

Mailing Address 4325 Chancellor Drive

City

DeWitt

State

MI

Zip Code

48820-7878

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A8315763F0C534F9A9A0**

Amount of Each Receipt this Period

210.00

Payroll Deduction: \$30.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Glen Perry**

Mailing Address 2148 Michele Dr

City

Troy

State

MI

Zip Code

48085-3825

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : ACE02D56709CA4A658EB**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

728.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 34 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Marilyn Smith**

Mailing Address 2485 Kimberly Fair

City

Rochester Hills

State

MI

Zip Code

48309-2061

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A60AA8DA29722472390A**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Laurie Wesolowicz**

Mailing Address 17455 Maple Hill Dr

City

Northville

State

MI

Zip Code

48168-3225

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A3189A75161FF46BA8F7**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Marcia Persin**

Mailing Address 5274 Pond Bluff Drive

City

W Blmld

State

MI

Zip Code

48323-2442

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AFCA2D5726ACB4863BD1**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

609.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 35 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Mary Bores**

Mailing Address 18890 Heather Ridge Dr

City

Northville

State

MI

Zip Code

48168-6814

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A717850A5CB734DDF950**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Donald Beam III**

Mailing Address 17861 Cranbrook Dr.

City

Northville

State

MI

Zip Code

48168-4334

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Medical Dir Medicaid

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A9B8AE9874AF3436DB1E**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Michael Pedigo**

Mailing Address 21620 Louise

City

St Clair Shores

State

MI

Zip Code

48081-2870

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Dir Speciality Products

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AD5A9632B25DF4D0898B**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

609.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 36 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Michael Maurer**

Mailing Address 2250 Haslett Road

City

Williamston

State

MI

Zip Code

48895-9624

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

Regional Director - Level II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

Transaction ID : A915B50729AFE4D05A0F

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Susan Crowley**

Mailing Address 31 Beacon Hill

City

Gross Pointe Farms

State

MI

Zip Code

48236-3001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

Transaction ID : A6B963863665B4B97A75

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Jacob Geyer**

Mailing Address 1175 Starboard Drive

City

Okemos

State

MI

Zip Code

48864-4415

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

Managing Dir, BA&UW Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

Transaction ID : AA862B3F8A482486E92E

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

609.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Brenda Lever**

Mailing Address 46775 Inverness Road

City State Zip Code  
Canton MI 48188-3051

FEC ID number of contributing federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : AD41CCC84B9B441038DF

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Patricia Stone**

Mailing Address 3377 Dewdrop Lane

City State Zip Code  
Howell MI 48843-7380

FEC ID number of contributing federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Director BCN Fin Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A8A3CE00E196C4062AFA

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Michael Reid**

Mailing Address 2333 El Dorado Dr. SE

City State Zip Code  
East Grand Rapids MI 49506-3537

FEC ID number of contributing federal political committee.

C

Name of Employer  
Accident Fund Insurance Company of Ame

Occupation  
Director, Lit, Sub & Medicare

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : ABAF94E087FBC42C29CE

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

609.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

A. Jason Hover

Mailing Address 2520 Meadowview Court

City

Rochester Hills

State

MI

Zip Code

48306-3822

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A4D87B301D7454F77ABF

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. Karen Christianson

Mailing Address 42881 Tomlinson Dr

City

Clinton Township

State

MI

Zip Code

48038-2497

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director - Finance

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A76CA72DACEF748BF912

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. Vera Grigorian

Mailing Address 17485 Laurel

City

Livonia

State

MI

Zip Code

48152-2962

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director Employee Labor Relat

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : AF5638DF8EDE74C9FB0F

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

609.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Linda Barnes**

Mailing Address 697 West Lansing Road

City State Zip Code  
Morrice MI 48857-9649

FEC ID number of contributing federal political committee.

C

Name of Employer  
Accident Fund Insurance Company of Ame

Occupation  
VP, Service Center

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : AFA3D55B71DFF4BDA8B6

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Joseph Hohner**

Mailing Address 2106 Stonebridge Way

City State Zip Code  
Canton MI 48188-6227

FEC ID number of contributing federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
EVP Health Care Value

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : AC3003A89DC884A8BAD3

Amount of Each Receipt this Period

420.00

Payroll Deduction: \$60.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Kelley Root**

Mailing Address 11725 Forestwood Drive

City State Zip Code  
Cedar Springs MI 49319-8236

FEC ID number of contributing federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Dir West MI Regional Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A797A2B46773A4EE4946

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

938.00

**SCHEDULE A (FEC Form 3X)****ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 OF 202

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Rebecca Holnagel**

Mailing Address 5117 Giesboro Lane

City	State	Zip Code
Okemos	MI	48864-1269

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

VP, Actuarial Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2014

Transaction ID : AA7774D64EA774647906

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Julia Griffith**Mailing Address 100 W 5th St  
Apt 803

City	State	Zip Code
Royal Oak	MI	48067-2562

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Dir Medicaid Qlty Perf Impvt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2014

Transaction ID : AE67E8FCE82C741E7A9C

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. James Huetteman**

Mailing Address 22901 Wilson

City	State	Zip Code
Dearborn	MI	48128-2808

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2014

Transaction ID : AF76C45F649D747CA8BC

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

609.00

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 41 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Laurine Symula Parmely**

Mailing Address 5772 Martell Drive

City State Zip Code  
Troy MI 48085-3160

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
VP and Deputy General Counsl

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A163B814EC4AA4ECE941**

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Cathy Longo**

Mailing Address 11704 Dublin Cir

City State Zip Code  
Jerome MI 49249-9745

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A8B7721C787E2487B83C**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Douglas Cedras**

Mailing Address 2616 McClintock

City State Zip Code  
Bloomfld MI 48302-0756

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AF1BE2418205F4B1F969**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

721.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 42 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Frank Freund**

Mailing Address 2949 Audrey's Way

City

East Lansing

State

MI

Zip Code

48823-7372

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

EVP, Corp Performance & CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A510CAA207A62480AAF8**

Amount of Each Receipt this Period

420.00

Payroll Deduction: \$60.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Terrence Burke**

Mailing Address 47195 Victorian Sq N

City

Canton

State

MI

Zip Code

48188-6323

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

VP Individual Business

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A82725A65729F4A6995B**

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Melissa Bolt**

Mailing Address 835 N. Mansfield St.

City

Ypsilanti

State

MI

Zip Code

48197-2032

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A612EBA94A651473F86C**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

938.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 43 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Kevin Stanko**

Mailing Address 2233 Camelot Drive

City State Zip Code  
Troy MI 48083-2556

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Attorney Senior

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A7D63132C59C8459ABC0**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Andrew McCallum**

Mailing Address 8510 Pine Cove Dr

City State Zip Code  
Commerce Township MI 48382-4455

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Finance Business Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A5FE5B39273CB4016A4B**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Audrey Harvey**

Mailing Address 25465 Waycross

City State Zip Code  
Southfield MI 48033-2206

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
VP BCBSM Foundation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AE66BC50BBBBB4575A74**

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

721.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Ray Warner**

Mailing Address 50707 Otter Creek

City State Zip Code  
 Shelby Twp MI 48317-1751

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : AB3F368517F0F4CB6A62

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Sharon Heath**

Mailing Address 28345 Carlton Way Dr

City State Zip Code  
 Novi MI 48377-2635

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Dir BCN Mem Engage & Sat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A5E97B82C98F34B08A9A

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Phillip Gillespie**

Mailing Address 1731 Cranston Ct

City State Zip Code  
 E Lansing MI 48823-2248

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 VP Bus & Program Dev & Reg Exec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A4DD69F99AE6D49D08A7

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

721.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 45 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Darcy Lake Kerr**

Mailing Address 10700 Sunfield Road

City State Zip Code  
 Sunfield MI 48890-9746

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Accident Fund Insurance Company of Ame

Occupation  
 SVP, Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A40012F3C25B543A0A17**

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Alan Huddy**

Mailing Address 40836 Knightsford Rd

City State Zip Code  
 Northville MI 48168-2300

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 VP Grp & Ind Pricing Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A154E82387BDF44188B1**

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. David Westphal**

Mailing Address 8272 Concord Rd

City State Zip Code  
 Grosse Ile MI 48138-1311

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Dir Workforce Optimization

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AA17CF6F195604003989**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

833.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 46 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Sondra Smith**

Mailing Address 21620 Louise St

City

Saint Clair Shores

State

MI

Zip Code

48081-2979

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

VP Mktplc & Reg Bus Intgr

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A9850FD91D7784E15B71**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. James Line**

Mailing Address 117 Wenonah Drive

City

Pontiac

State

MI

Zip Code

48341-1957

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A8ACE0C37567F4A44922**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Joseph Bojman**

Mailing Address 15971 Jeanette

City

Southfld

State

MI

Zip Code

48075-2012

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AEAAFD71D23324BA1BEE**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

609.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Ira Strumwasser**

Mailing Address 5076 Scio Church Rd

City State Zip Code  
 Ann Arbor MI 48103-9599

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 VP BCBSM Foundation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 06 26 2014

Transaction ID : ABE202530E3E14D23A17

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Catherine Sinning**

Mailing Address 25232 Surrey Lane

City State Zip Code  
 Frmgtn Hls MI 48335-2041

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Director - Exec Compensation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 06 26 2014

Transaction ID : A56A36B08904A4C69B7B

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Sharon Gipson**

Mailing Address 33983 Brittany Dr

City State Zip Code  
 Farmington Hills MI 48335-1427

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 VP Corporate Audit

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 06 26 2014

Transaction ID : A357EAF15486F45FC84D

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

833.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Kathleen Popiela**

Mailing Address 36365 Parklane Circle

City State Zip Code  
 Farmingtn MI 48335-4210

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 06 26 2014

Transaction ID : A169F4364F14B4A808EE

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Mary Van Tiem**

Mailing Address 805 Leinster

City State Zip Code  
 Rchstr Hls MI 48309-2426

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Director Asst Gen Auditor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 06 26 2014

Transaction ID : A5630836C3BAB44739A6

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Beckie Thompson**

Mailing Address 1436 Sheridan St

City State Zip Code  
 Plymouth MI 48170-1533

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Dir Exec Comm & Press Scrt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 06 26 2014

Transaction ID : A9777BDA38D0B46E6BA5

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

609.00

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Ronald Wood**

Mailing Address 29225 Lake Park

City State Zip Code  
Frmgtn Hls MI 48331-2661

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
VP Underwriting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A35B7A27FE06042CD925**

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Michael Tegler**

Mailing Address 46040 White Pines Dr.

City State Zip Code  
Novi MI 48374-3795

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AA8F1BB8CC56A4D5FA15**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**c. Kristina Seppala**

Mailing Address 9132 Klein Farm Lane

City State Zip Code  
Grand Ledge MI 48837-8267

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Accident Fund Insurance Company of Ame

Occupation  
Director, Project Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A80F8A24D2E4D4D2F943**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

721.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 50 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Tricia Keith**

Mailing Address 1918 Lloyd Ave

City

Royal Oak

State

MI

Zip Code

48073-3803

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

SVP Corporate Secy & Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A85BA2DE2B18540C2A54**

Amount of Each Receipt this Period

420.00

Payroll Deduction: \$60.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Michael Grenon**

Mailing Address 681 Clark Road

City

Ceresco

State

MI

Zip Code

49033-9604

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

Director, Investgtive Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A633C80F32E074CEDA08**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Diane Bridgeman**

Mailing Address 687 Chestnut Dr

City

Wixom

State

MI

Zip Code

48393-4304

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Dir Clinical Program Oper

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : ABC9D40E5EFA94FBEB17**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

826.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 51 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Rebecca Kolinski**

Mailing Address 204 Nightingale

City

Dearborn

State

MI

Zip Code

48128-1527

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Dir Medicaid Strgy & Analyt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AC0773F2627894411B81**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Michael Sekoni**

Mailing Address 16590 Broadview Drive

City

East Lansing

State

MI

Zip Code

48823-9628

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

VP, & General Auditor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A55EF8A7E4F8F4F33BCF**

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Deidra Wilson**

Mailing Address 3031 Crofton Dr

City

Dewitt

State

MI

Zip Code

48820-7770

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AB7D1F99B27CD47588FE**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

721.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 52 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Jacqueline Barker**

Mailing Address 4036 Chablis St

City

West Bloomfield

State

MI

Zip Code

48323-3027

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

Transaction ID : AEFB2772EB304E798D9

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. William Plies**

Mailing Address 1334 Cole St

City

Birmingham

State

MI

Zip Code

48009-7033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

Transaction ID : A5F4FFB7899FB4A0A85C

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Nancy Wanchik**

Mailing Address 38669 Mystic Ct

City

Farmington Hills

State

MI

Zip Code

48331-5981

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

VP BCBSM and CEO Medicaid

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

06 / 26 / 2014

Transaction ID : AD072CB9CEDCA4079A48

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

721.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Sheila Brake**

Mailing Address 7782 Forestview Drive

City State Zip Code  
 Haslett MI 48840-8720

FEC ID number of contributing federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

Director, Underwriting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A058C58DF01EC44E4AAE

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Scott Sowulewski**

Mailing Address 11949 Schavey Rd.

City State Zip Code  
 Dewitt MI 48820-8720

FEC ID number of contributing federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

Director, EE &amp; Labor Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : AB9A1AB71F82845C3899

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. S Kipa**

Mailing Address 4774 Avondale Terrace

City State Zip Code  
 Blmfld Hls MI 48304-3602

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A6221D6E80C614584943

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

609.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 54 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. John Salvia**

Mailing Address 45017 Walnut Ridge Court

City

Northville

State

MI

Zip Code

48168-4430

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director - Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AFCA7152376F64E449DC**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Korin Kendra**

Mailing Address 815 S Lafayette

City

Dearborn

State

MI

Zip Code

48124-1547

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A1E4D3E805F16482E9AF**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Richard Hetzel**

Mailing Address 635 McKinley St

City

Plymouth

State

MI

Zip Code

48170-1521

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

VP Corporate Communications

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A8052DE38EE034F2DAE3**

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

721.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

A. Lisa Varnier

Mailing Address 4139 Wakefield

City State Zip Code  
 Berkley MI 48072-3463

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Attorney Senior

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A0602DA7C7C224D14990

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. Patrice Matejka

Mailing Address 19520 Hillcrest

City State Zip Code  
 Livonia MI 48152-1723

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A0438B8AB295A445B9A4

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. Laura Marble

Mailing Address 1880 Golf Ridge Dr S

City State Zip Code  
 Bloomfield Township MI 48302-1737

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
VP Mi Delivery System&support

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A14A6565CA3894463814

Amount of Each Receipt this Period

420.00

Payroll Deduction: \$60.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

826.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 56 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Chris Maier**

Mailing Address 6061 Middle Lake Rd

City

Clarkston

State

MI

Zip Code

48346-2047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

VP Claims Enroll & Prgm Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

06 / 26 / 2014

Transaction ID : AA0860F9501E248CE947

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Amy Modlin**

Mailing Address 2312 Fort William Dr

City

Olney

State

MD

Zip Code

20832-1665

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

VP Federal Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

489.00

Date of Receipt

06 / 26 / 2014

Transaction ID : A9A1048F80D764533B31

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Kristen Kangas-Kraft**

Mailing Address 1219 S Swegles St

City

Saint Johns

State

MI

Zip Code

48879-2321

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

Transaction ID : AD94CEDFD3F444C88B2F

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

833.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 57 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

## **A. Michelle Fullerton**

Mailing Address 23528 Fordson

City

Dearborn

State

MI

Zip Code

48124-1602

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A92AA9AD078254D36B00**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **B. Anthony Lancione**

Mailing Address 2463 Lost Creek Drive

City

Flushing

State

MI

Zip Code

48433-9437

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

Director, Premium Audit

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AF1174FB8275A4D61A0C**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **C. Tiffany Otis-Albert**

Mailing Address 18920 Stonewater Blvd

City

Northville

State

MI

Zip Code

48168-8560

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

VP Subsidiary Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A360E5E29A39B43B2973**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

609.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 58 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Robert Phillips**

Mailing Address 21985 Ember Ct

City

Grosse Ile

State

MI

Zip Code

48138-3001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Attorney Senior

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : ADAAF0D7F6DE24A74AEE**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Sandra Fester**

Mailing Address 62715 Pond Drive

City

Washington

State

MI

Zip Code

48094-1333

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Dir Rgn Sales Mid & Small

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A40749FAD894E4B059DC**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Monica Mckinney**

Mailing Address 36350 Fredericksburg Rd

City

Farmington Hills

State

MI

Zip Code

48331-3116

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Dir Customer Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A869844E5551A4291B02**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

609.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 59 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

## **A. Shirley Glazier**

Mailing Address 16384 Brookwood Ct

City  
Northville

State  
MI

Zip Code  
48168-3492

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

Transaction ID : AFCE7EABB73344C3D844

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **B. Daniel Blazo**

Mailing Address 6980 Crestwood

City

Dearbn Hts

State

MI

Zip Code

48127-1998

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

Transaction ID : A973F400885B7477297B

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **C. Dennis Winkler**

Mailing Address 2888 Kilburn Ct

City

Rchstr Hls

State

MI

Zip Code

48306-3025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

Transaction ID : ABEDE38C6D4B9449EA7C

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

609.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 60 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Alan Gileczek**

Mailing Address 7053 N Lake Orchard Drive

City State Zip Code  
 Gregory MI 48137-9694

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Accident Fund Insurance Company of Ame SVP, BD Regional Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AAC77586F44814C479CF**

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Ann Baker**

Mailing Address 1153 Nottingham

City State Zip Code  
 Grosse Pointe Park MI 48230-1339

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Blue Cross Blue Shield of Michigan Sr Dir WCM and Health Prmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AB385E58F89304E58B1F**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. James Negro**

Mailing Address 5270 Inverrary Ln

City State Zip Code  
 Commrce Twp MI 48382-1048

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Blue Cross Blue Shield of Michigan Director Sales Infrm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2117935A283A4F8AB73**

Amount of Each Receipt this Period

273.00

Payroll Deduction: \$39.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

791.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Gary Gavin**

Mailing Address 10721 Stoney Point Dr

City State Zip Code  
 South Lyon MI 48178-9820

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

VP Key &amp; Large Group Business

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A1DF81C7D8AA54E85BA4

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. James Grzegorzczuk**

Mailing Address 4916 Beech Road

City State Zip Code  
 Hope MI 48628-9608

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A50263AE19445424D804

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Jeffrey Tokarz**

Mailing Address 9240 Stonegate Dr.

City State Zip Code  
 Clarkston MI 48348-2473

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A9E69E3073F8B4372907

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

721.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 62 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Timothy Cook**

Mailing Address 28140 Kendallwood Dr

City

Farmington Hills

State

MI

Zip Code

48334-3454

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A544297C578F84F72B97**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Kenneth Bluhm**

Mailing Address 6187 Brittany Tree

City

Troy

State

MI

Zip Code

48085-1085

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AB122234179FC47C0907**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Renee Rabideau**

Mailing Address 1699 S Shore Dr

City

Rochester Hills

State

MI

Zip Code

48307-4314

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A691226C2DFB74714AB6**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

609.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Richard Burgess**

Mailing Address 5163 Springdale Ct

City

Clarkston

State

MI

Zip Code

48348-5039

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Dir New Bus Sales &amp; Cnslt

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A502A759F09C14064878

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Michael Seling**

Mailing Address 8610 Carlsbad Lane

City

Lansing

State

MI

Zip Code

48917-5807

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

Divisional Dir, BD Operations

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A7A11DD778C834B039F7

Amount of Each Receipt this Period

210.00

Payroll Deduction: \$30.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Mark Johnson**

Mailing Address 243 Gladwin Ave

City

Clawson

State

MI

Zip Code

48017-2205

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

VP Ntwk Mgt &amp; Bus Sgmt Align

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A2CEFDB6CCC0F4F1585B

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

728.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 64 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Barbara Derian**

Mailing Address 2403 Sanders Place

City

Bloomfield

State

MI

Zip Code

48302-0460

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Sr. Director Bus Config

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A0B56970510B649188BD**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Darline El Reda**

Mailing Address 1410 Lee Wood Rdg

City

Walled Lake

State

MI

Zip Code

48390-4400

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Dir HCV Dta Anl Prg Eval &Rpt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A6E6729BC1BEE44B2806**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Juanita Savage**

Mailing Address 25646 Castlereigh Dr

City

Farmington Hls

State

MI

Zip Code

48336-1523

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A0825BC2BC4DC4976A13**

Amount of Each Receipt this Period

420.00

Payroll Deduction: \$60.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

826.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 65 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

## **A. Frederick Schaal**

Mailing Address 2109 Ray Road

City  
Fenton

State  
MI

Zip Code  
48430-9709

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A27F56AF1CA6D4FA5BE6**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **B. Gregory Howard**

Mailing Address 2102 Winners Circle

City  
St. Johns

State  
MI

Zip Code  
48879-8167

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

Regional Director - Level II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : ABD916D132E7C43F1ABC**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **C. Thomas Ladouceur**

Mailing Address 156 Wadsworth Lane

City  
Bloomfield Hills

State  
MI

Zip Code  
48301-3342

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AFFF7C1FCE37548E08D0**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

609.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Robert Hopper**

Mailing Address 40671 La Grange Dr

City State Zip Code  
 Sterling Heights MI 48313-4340

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A5CCCFB73E56E44C99DE

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. James Lang**

Mailing Address 9050 Carter Dr

City State Zip Code  
 Saline MI 48176-8006

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 VP Pharmacy Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A27F4A1CB325A4BE7B31

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Scott Eicher**

Mailing Address 3355 Essex Ct

City State Zip Code  
 Troy MI 48084-2722

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A766509D83BB54689BDF

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

721.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 67 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Yan Yang**

Mailing Address 17922 Ridgeview Dr

City

Northville

State

MI

Zip Code

48168-8566

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A86DDA93BAACC4882A7C**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Jeffrey Rumley**

Mailing Address 951 Hampton Rd

City

Grosse Pointe Woods

State

MI

Zip Code

48236-1341

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

VP and General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AA0DC3E8809A041E48F3**

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Victoria Kell**

Mailing Address 8175 Hunter Road

City

Bath

State

MI

Zip Code

48808-9459

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

Director, Comp & Benefits

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A41C0093357CA43E4A83**

Amount of Each Receipt this Period

245.00

Payroll Deduction: \$35.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

763.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 68 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

## **A. Rebecca Erfurt**

Mailing Address 42868 Clay Ct

City

State

Zip Code

Novi

MI

48377-2711

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Blue Cross Blue Shield of Michigan

Director II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

Transaction ID : AFF85D68E1A8A42D0AB1

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **B. Michelle Billingsley**

Mailing Address 20143 Doyle Ct

City

State

Zip Code

Grosse Pointe Woods

MI

48236-2402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Blue Cross Blue Shield of Michigan

VP Bus Intell & IT Delivr

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

585.00

Date of Receipt

06 / 26 / 2014

Transaction ID : A121414C4DB4C4370AE4

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **C. Stefanie Thornton**

Mailing Address 13449 Diegel Dr

City

State

Zip Code

Shelby Township

MI

48315-1342

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Blue Cross Blue Shield of Michigan

Director- Talent Acq

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

Transaction ID : AD603EA98491B4DF5863

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

721.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 69 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Darrell Middleton**

Mailing Address 5669 Shore Dr

City

Orchard Lake

State

MI

Zip Code

48324-2966

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

EVP Ops & Business Perform

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A6E7B58B5EB9142DAB7E**

Amount of Each Receipt this Period

420.00

Payroll Deduction: \$60.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Alison Pollard**

Mailing Address 170 Orchard St

City

Chelsea

State

MI

Zip Code

48118-1052

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

VP Provider Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A17857B52A3C74F70AE7**

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Steven Reynolds**

Mailing Address 12416 Golden Oaks Drive

City

Milford

State

MI

Zip Code

48380-1254

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

VP, Corporate Sec and Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

845.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A662F7C7FDD9C4D3996B**

Amount of Each Receipt this Period

455.00

Payroll Deduction: \$65.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1190.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 70 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Kathryn Wilson**

Mailing Address 1361 Palmer

City  
Plymouth

State Zip Code  
MI 48170-2069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Dir BCN Corp Admin & Plng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A214DCF22576242A0AF9**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Lynda Rossi**

Mailing Address 1066 Foxborough Dr

City  
Williamston

State Zip Code  
MI 48895-9206

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
EVP Strgy Govern & Pub Aff

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AB550DD6586FA404AA00**

Amount of Each Receipt this Period

700.00

Payroll Deduction: \$100.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Carol Gawronski**

Mailing Address 12240 Rohn Road

City  
Fenton

State Zip Code  
MI 48430-9519

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A0070693712024B03B11**

Amount of Each Receipt this Period

420.00

Payroll Deduction: \$60.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1323.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 71 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Michael Momrik**

Mailing Address 1364 Arbor Creek Dr

City

Rochester Hills

State

MI

Zip Code

48306-3700

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A648016EA2A5D43EB915**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Lawrence Hoffman**

Mailing Address 6872 Cedarbrook Dr

City

Bloomfield Hills

State

MI

Zip Code

48301-3017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : ADF4019DE451C4A2AA4A**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. David Brown**

Mailing Address 551 Plymouth Ave SE

City

Grand Rapids

State

MI

Zip Code

49506-2841

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A501002B0B9134BAEB18**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

609.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 72 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Kevin Stutler**

Mailing Address 24777 Reeds Pointe Dr

City State Zip Code  
Novi MI 48374-2537

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
VP Enterprise Ancillary Busi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A87C0259EA3D142D3ACA**

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Joseph Andraska**

Mailing Address 2220 Tilsby Ct

City State Zip Code  
Ann Arbor MI 48103-6160

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Dir Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A3AE8AA965FD54597A70**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Patricia Bojicic**

Mailing Address 29223 Glencastle Court

City State Zip Code  
Frmgtn Hls MI 48336-1416

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A06F6547D0A4B439DB5D**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

721.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

A. Kurt Barr

Mailing Address 1532 Hollywood Ave

City

Grosse Pointe Woods

State

MI

Zip Code

48236-1310

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Dir Corp Bus Dev &amp; ERM

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A280C76175F0E4B5E939

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. Cynthia Dion

Mailing Address 41584 Stonehenge Manor

City

Clinton Township

State

MI

Zip Code

48038-4642

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

VP Bus Effic &amp; Continu Imprv

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A5D0E74A2340045338A8

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. Paul Loffreda

Mailing Address 7071 Buckhorn Lake Rd

City

Holly

State

MI

Zip Code

48442-9183

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : AEB36A31B3AA545BAB8B

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

721.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Scott David**

Mailing Address 1234 Camille Dr SE

City

Grand Rapids

State

MI

Zip Code

49546-4303

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

Director, Agency Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 29 / 2014

Transaction ID : AAD0B9F0525774E759D0

Amount of Each Receipt this Period

145.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Dennis Proctor**

Mailing Address 43248 Pepperwood St

City

Canton

State

MI

Zip Code

48187-2349

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Dir Workforce Optimization

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A3F41581CFA2046B4BAF

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Michele Lundberg**

Mailing Address 46852 Bartlett

City

Canton

State

MI

Zip Code

48187-1404

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A60BFF5D18F644F1DA94

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

551.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Sean Quigley**

Mailing Address 207 S Highland St

City State Zip Code  
 Dearborn MI 48124-1461

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Director Strategy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : AD8C26E70D4C7415791A

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Gary Harvey**

Mailing Address 1835 Robindale

City State Zip Code  
 Dearborn MI 48128-1047

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 VP Information Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A3D215FDF06C346B285D

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Amal Berry-Brown**

Mailing Address 23047 Beech Street

City State Zip Code  
 Dearborn MI 48124-2617

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Sr Dir Diversity & Inclusion

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : AC70FD1DB8A7F42879E4

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

833.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 76 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Paul MacLellan**

Mailing Address 13284 Karl Dr

City  
Plymouth

State Zip Code  
MI 48170-1093

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

Transaction ID : AA06E335369324426B98

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Sandra Ross**

Mailing Address 921 Church St

City  
Plymouth

State Zip Code  
MI 48170-1643

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Accident Fund Insurance Company of Ame

Occupation  
Director, ER & Cap Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

Transaction ID : A077B77DE1E6843E18AD

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Phillip Churchill Jr**

Mailing Address 3026 Westchester Rd

City  
Lansing

State Zip Code  
MI 48911-1044

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Attorney Senior

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

Transaction ID : AA02080108FBF4BD587D

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

609.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

A. Briana Chen

Mailing Address 37882 Amber Drive

City

Farmington Hills

State

MI

Zip Code

48331-1170

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : AC6C67413DD5E483898C

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. William Carney

Mailing Address 2723 Carnoustie Drive

City

Okemos

State

MI

Zip Code

48864-3348

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

SVP, Chief UW Officer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A5A78E4AB18AB4CC0BC7

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

c. Joseph David

Mailing Address 20910 Normandy Ct

City

Northville

State

MI

Zip Code

48167-3098

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Dir URMBS Account

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A084C9C77FA5B4718A3F

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

721.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 78 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

## **A. Ryan Bobel**

Mailing Address 920 Hilldale Dr

City

Royal Oak

State

MI

Zip Code

48067-1606

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Attorney Senior

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A85F22096134545D0B77**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **B. Brendan Edwards**

Mailing Address 1346 Ardmoor Dr

City

Bloomfield Hills

State

MI

Zip Code

48301-2160

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A25ABA69605F34111AEB**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **C. Susan Burns**

Mailing Address 987 Hickory Heights Dr.

City

Bloomfield Hills

State

MI

Zip Code

48304-3126

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Dir Phys Group Incentive Prog

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A6236F47529DF4EFF9DD**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

609.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 79 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Michael Jennings II**

Mailing Address 24637 Millcreek Dr

City

Farmington Hills

State

MI

Zip Code

48336-2809

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A54F5A02DCB3E485FA67**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Penny Wall**

Mailing Address 555 Brush St  
Apt 1411

City

Detroit

State

MI

Zip Code

48226-4354

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director - Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AC6FBD39F537943498D7**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Elana Kozik**

Mailing Address 13109 Vernon

City

Huntng Wds

State

MI

Zip Code

48070-1451

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

VP Prod/proc Improvement

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A646F1DA7CB834D3C83A**

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

721.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 80 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Kathryn Woodyard**

Mailing Address 2604 Woodward

City  
Detroit

State  
MI

Zip Code  
48201-3029

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A5B964A5ACED54C9D976**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Dale Schultz**

Mailing Address 230 Bellevue Ave

City

Lake Orion

State

MI

Zip Code

48362-2706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Dir Systems Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AB555FA53034A4589900**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Marc Keshishian**

Mailing Address 30498 Fox Club Dr

City

Farmington Hills

State

MI

Zip Code

48331-1956

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Svp & Chief Medical Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AC74C90812D2E4651838**

Amount of Each Receipt this Period

420.00

Payroll Deduction: \$60.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

826.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 81 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Jeffrey Rubleski**

Mailing Address 4045 Forest Point Dr

City

Muskegon

State

MI

Zip Code

49441-4680

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director - Regional Sales

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A17413625C7CE45DEA5F**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Michelle Pace**

Mailing Address 9608 Hubert

City

Allen Pk

State

MI

Zip Code

48101-1302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Dir Rating/underwriting

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AD8BC684ACF8F401A83D**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Dean Holland**

Mailing Address 4207 Barton Rd

City

Lansing

State

MI

Zip Code

48917-1653

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

Director, Claims

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AD3693C889D4541278D3**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

609.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 82 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Michele Samuels**

Mailing Address 29203 Bradmoor Ct

City

Farmington Hills

State

MI

Zip Code

48334-3270

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

SVP Gnrl Aud &amp; Corp Compliance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : AEEFB55CBF7714F2FBAD

Amount of Each Receipt this Period

420.00

Payroll Deduction: \$60.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Richard Notter II**

Mailing Address 1290 E Lincoln St

City

Birmingham

State

MI

Zip Code

48009-7191

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : AB4C7742797A94C86861

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Catherine Porter**

Mailing Address 14226 Deering

City

Livonia

State

MI

Zip Code

48154-4618

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director - Talent Mgt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : AB7F86E4F2E504BAA8D6

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

826.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 83 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Patricia Wilson**

Mailing Address 597 Dresden Place

City

St Clr Bch

State

ON

Zip Code

N8N 4-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AB7A779CE611C47F6884**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Jeffrey Connolly**

Mailing Address 12500 Bluff Hollow Trail

City

Traverse City

State

MI

Zip Code

49686-8402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

VP BCBSM & Presid Of West MI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AF2CB4B1FC73F45F5A17**

Amount of Each Receipt this Period

420.00

Payroll Deduction: \$60.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Anthony Phillips**

Mailing Address 8697 North Hills Court

City

Howell

State

MI

Zip Code

48843-6126

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

SVP, Chief RO & Chief Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A327C71D7E417492EBC9**

Amount of Each Receipt this Period

420.00

Payroll Deduction: \$60.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1043.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 84 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

## **A. Deborah Sopo**

Mailing Address 9675 Peer Rd

City

South Lyon

State

MI

Zip Code

48178-8121

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

06 / 12 / 2014

Transaction ID : AD5BE8C859ED14FC9B97

Amount of Each Receipt this Period

174.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **B. Carla Laethem**

Mailing Address 450 Oak Ave  
Apt 203

City

Birmingham

State

MI

Zip Code

48009-1389

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

VP Hlth & Medical Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

06 / 26 / 2014

Transaction ID : AF9C7C1A8B80F4492B5F

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **C. Gerald Noxon**

Mailing Address 22745 Huron River Dr

City

New Bostn

State

MI

Zip Code

48164-9439

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

Transaction ID : AE3C437EF81B1467398E

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

692.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 85 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

## **A. Bridget Hurd**

Mailing Address 25306 St. James

City  
Southfield

State Zip Code  
MI 48075-1243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

MM / DD / YYYY  
06 / 26 / 2014

**Transaction ID : A6A220CF69BF340B4B71**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **B. Carolynn Walton**

Mailing Address 5835 Pinecroft Dr.

City  
W Blmfd

State Zip Code  
MI 48322-1669

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
VP & Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

MM / DD / YYYY  
06 / 26 / 2014

**Transaction ID : AB0EB6B39FB4345CCBCD**

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **C. Richard Znidarsic**

Mailing Address 14970 Forest Hill Road

City  
Grand Ledge

State Zip Code  
MI 48837-9223

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Accident Fund Insurance Company of Ame

Occupation  
VP, Information Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

MM / DD / YYYY  
04 / 17 / 2014

**Transaction ID : A78C12F930BFE437DA43**

Amount of Each Receipt this Period

90.00

Payroll Deduction: \$45.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

608.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 86 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

## **A. Beverly Lamb-Stovall**

Mailing Address 5711 Branford Dr

City  
W Bloomfield

State Zip Code  
MI 48322-1123

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

Transaction ID : A08329F3376CC471B8E1

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **B. Marsha Ennis**

Mailing Address 1161 Balfour St

City  
Grosse Pointe Park

State Zip Code  
MI 48230-1326

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Director - Business Developmnt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

Transaction ID : A9F6C6689493B442CB76

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **C. Nicole Wotlinski**

Mailing Address 3740 High Grove Way

City  
Lake Orion

State Zip Code  
MI 48360-1572

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

Transaction ID : A5B4FEC9D381D4EA4A94

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

609.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 87 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Shannon Scholten**

Mailing Address 1776 Kahres

City

State

Zip Code

Holt

MI

48842-9651

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Accident Fund Insurance Company of Ame

Director, Mrktg Communications

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

Transaction ID : A44E8449D7F364E58BEA

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Laura Byars**

Mailing Address 5067 Maceri Circle

City

State

Zip Code

Sterling Heights

MI

48314-4076

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Blue Cross Blue Shield of Michigan

Sr Dir Human Performance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

Transaction ID : AB974A66F8CF14380B5E

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. James Kallas**

Mailing Address 14214 Brooks Edge Cir

City

State

Zip Code

Fishers

IN

46040-1281

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Blue Cross Blue Shield of Michigan

VP of Finance and Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

06 / 26 / 2014

Transaction ID : A9258EE125A454F4C81D

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

721.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 88 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

A. Seth Crawford

Mailing Address 28736 Stonewall Court

City State Zip Code  
 Novi MI 48377-2720

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

VP Underwriting &amp; Actural Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 06 26 2014

Transaction ID : ACA2381365EF140BC930

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. Karriem Shakoor

Mailing Address 4822 Trailview

City State Zip Code  
 West Bloomfield MI 48322-4572

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Sr Dir IT Shared Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 06 26 2014

Transaction ID : AB81F1F73173041CE90B

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. Joseph Murray

Mailing Address 22325 Yale St

City State Zip Code  
 St Clair Shores MI 48081-2039

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Attorney Senior

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 06 26 2014

Transaction ID : A614AE7AA148C4506939

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

833.00

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 89 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Debra Trezil**

Mailing Address 17560 White Pine Ct

City  
Northville

State  
MI

Zip Code  
48168-4358

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A9F228C19A7784085A0D**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Amy McKenzie MD**

Mailing Address 11453 Timbers Drive

City

Washington Twp

State

MI

Zip Code

48094-3775

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Physician Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : ABDDA1F1FD16140DABB3**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Diane Cantara**

Mailing Address 2710 Seymour Lk Rd

City

Oxford

State

MI

Zip Code

48371-4238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A430D1703A01D417EADC**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

609.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 90 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

## **A. Gary Dusute**

Mailing Address 29762 Bayview

City State Zip Code  
 Grosse Ile MI 48138-1902

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A10F9C6A0D41B41B4847**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **B. Kimberly Jones-Schneider**

Mailing Address 1219 Chelsea Blvd

City State Zip Code  
 Oxford MI 48371-6729

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A5226265E2FBC484DADF**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **C. David Share**

Mailing Address 1225 Fair Oaks Parkway

City State Zip Code  
 Ann Arbor MI 48104-3628

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 SVP Value Partnerships

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AB98A9E3F3DBC48D2A70**

Amount of Each Receipt this Period

420.00

Payroll Deduction: \$60.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

826.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 91 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Mary Goheen**

Mailing Address 46655 Pinehurst Cir

City  
NorthvilleState  
MIZip Code  
48168-8488FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

VP Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A4AB69C498331430BB3B

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Lisa Riddle**

Mailing Address 7269 Pine Vista

City  
BrightonState  
MIZip Code  
48116-4736FEC ID number of contributing  
federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

VP, Claims &amp; Med Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A817482CBA0C0461CAE4

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Adele Martz**

Mailing Address 36780 Chesapeake Road

City  
Farmington HillsState  
MIZip Code  
48335-1130FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director Entprse Risk Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A9C42B03516F84086BF0

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

833.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 92 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Mary Bolton**

Mailing Address 21706 Chase Dr.

City State Zip Code  
Novi MI 48375-4766

FEC ID number of contributing federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Medical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 26 2014

Transaction ID : AE57E32E933694E83B48

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Jodi Siegel**

Mailing Address 9986 Sedlock

City State Zip Code  
White Lk MI 48386-2865

FEC ID number of contributing federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 26 2014

Transaction ID : A8F392B70BACF4FC5BDD

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. David Nelson**

Mailing Address 23928 Devonshire Dr

City State Zip Code  
Novi MI 48374-3758

FEC ID number of contributing federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
VP and Chief Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 26 2014

Transaction ID : A9A1BA45388434D46A1C

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

721.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 93 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Julie Smith**

Mailing Address 260 Guilford Rd

City

Bloomfield Hills

State

MI

Zip Code

48304-2737

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

VP Senior Business

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AE68F3E185A1A4F8B86D**

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Amienne Frenzel**

Mailing Address 4591 Covered Bridge

City

Bloomfield Hills

State

MI

Zip Code

48302-1831

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

VP Service Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A567C5D10EF994EC6A0D**

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Denise Turman**

Mailing Address 19532 Bretton Drive

City

Detroit

State

MI

Zip Code

48223-1269

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A5CAC2B5CD21B44F091B**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

833.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 94 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Robyn Rontal**

Mailing Address 2397 Rockport Ct

City

Ann Arbor

State

MI

Zip Code

48103-8911

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AE677982D20544ACAA50**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Barbara Brown-Cadovich**

Mailing Address 356 Falling Brook Dr

City

Troy

State

MI

Zip Code

48098-4646

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AE8C2D30CCAE74FA3AAF**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Suzanne Berletich**

Mailing Address 1938 Grayslake Dr

City

Rochester Hills

State

MI

Zip Code

48306-3235

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A48F59745A12E4761BCF**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

609.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 95 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Bert Foote**

Mailing Address 4335 West Pointe Drive

City State Zip Code  
 Waterford MI 48329-4650

FEC ID number of contributing federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

Regional Director - Level II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : AC983BA9C44CA4DD29E0

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Erika Monroe**

Mailing Address 15531 Brookstone Dr

City State Zip Code  
 Clinton Township MI 48035-1060

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A739C9563F6474F409C9

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Laura Walker**

Mailing Address 26192 Summerdale Dr  
 Bldg 12 Unit 92

City State Zip Code  
 Southfld MI 48033-6135

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Dir - Human Performance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A33D445CDB3BA47E6BEC

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

609.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)****ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 96 OF 202

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Dominick Mitchell III**

Mailing Address 41500 Ladywood Ct

City

Northville

State

MI

Zip Code

48167-2342

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2014

**Transaction ID : AEEC4090C11AB45148EF**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Alan Byrnes**

Mailing Address 15063 Lakewood Dr

City

Plymouth

State

MI

Zip Code

48170-2679

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2014

**Transaction ID : A0A02769B745A4BC6937**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Valerie Keesee**

Mailing Address 3400 E Coon Lake Rd

City

Howell

State

MI

Zip Code

48843-9420

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Dir - Human Performance

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2014

**Transaction ID : A6D08E64536EC4D3C8D1**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ▶

609.00

**TOTAL** This Period (last page this line number only)..... ▶



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 97 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Elizabeth Haar**

Mailing Address 3607 Kipling Cir

City

Howell

State

MI

Zip Code

48843-7444

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Svp Subsidiary Operations

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

975.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A1966C3013BCF49D196E

Amount of Each Receipt this Period

525.00

Payroll Deduction: \$75.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Michael Britt**

Mailing Address 5439 Timberbend Drive

City

Brighton

State

MI

Zip Code

48116-4796

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

President Af Ins Co Of America

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A21B123BDDA9B40FE879

Amount of Each Receipt this Period

420.00

Payroll Deduction: \$60.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Dell Dexter**

Mailing Address 191 Village Way

City

Canton

State

MI

Zip Code

48188-3449

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : AD00D46316A2C41B7BAB

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

1148.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 98 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

## **A. Chad Crosby**

Mailing Address 23764 Copperwood Dr E

City State Zip Code  
 South Lyon MI 48178-1423

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A1A389BEA0DD644A6AE6**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **B. Rick Morrone**

Mailing Address 3751 Parker

City State Zip Code  
 Dearborn MI 48124-3557

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 VP URMBS & Auto Accounts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AEAD064BECD1245A1999**

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **C. Kevin Klobucar**

Mailing Address 2766 Addison Cir N

City State Zip Code  
 Rochester MI 48306-4912

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 SVP BCBSM & PRES & CEO BCN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : ACDC5315E24D9429AB94**

Amount of Each Receipt this Period

315.00

Payroll Deduction: \$45.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

833.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 99 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Ronald Arambula**

Mailing Address 2020 Palmer Dr

City  
Wixom

State  
MI

Zip Code  
48393-1247

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2D19ED79E61E400CB55**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Michael Eckert**

Mailing Address 2595 Parkway PI

City  
Hartland

State  
MI

Zip Code  
48353-3229

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

Director, WSC Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AFCB530ACC6FB4A4F946**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Catherine Murphy**

Mailing Address 31700 W Bell Vine Trl

City  
Beverly Hills

State  
MI

Zip Code  
48025-3715

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Dir Memb & Prov Acctg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AB81665A64FCB4AC28FB**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

609.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 100 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Benjamin Grier**

Mailing Address 19841 Northbrook Dr

City

Southfield

State

MI

Zip Code

48076-5053

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director Treasury Svcs

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A5A2B18B3FDC6425C86C

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Jane Schafer**

Mailing Address 1244 Yuma Ridge Dr SW

City

Byron Center

State

MI

Zip Code

49315-8071

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Dir Claims Administration

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : AF4FCC6A45C8B4052914

Amount of Each Receipt this Period

175.00

Payroll Deduction: \$25.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. John Ganos**

Mailing Address 316 Abbey Wood Drive

City

Rochester

State

MI

Zip Code

48306-2602

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

Staff Counsel II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : ABBAC48C6A156486DB0A

Amount of Each Receipt this Period

175.00

Payroll Deduction: \$25.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

553.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 101 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Paul Nehls**

Mailing Address 1654 Delmonte

City State Zip Code  
Walled Lake MI 48390-1921

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AA3A1E61BECFE4F0DAB4**

Amount of Each Receipt this Period

175.00

Payroll Deduction: \$25.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Mary McFarlane**

Mailing Address 797 Sandalwood Rd

City State Zip Code  
Canton MI 48188-3032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Director Quality Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A93782EDBE00A487F956**

Amount of Each Receipt this Period

175.00

Payroll Deduction: \$25.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Paul Kauffman**

Mailing Address 6091 Balmoral Way

City State Zip Code  
Commerce Township MI 48382-4892

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Accident Fund Insurance Company of Ame

Occupation  
Director, Medical Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A87E5541A46724CC2B48**

Amount of Each Receipt this Period

161.00

Payroll Deduction: \$23.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

511.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 102 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Mary Moore**

Mailing Address 7732 Hipp

City State Zip Code  
Taylor MI 48180-2613

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AF68B9E7548084F599BB**

Amount of Each Receipt this Period

175.00

Payroll Deduction: \$25.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Constance Samuel**

Mailing Address 19385 Marilyn St

City State Zip Code  
Northville MI 48167-2641

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A851A5D22FE7D4FD38AB**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Nicole Winters**

Mailing Address 29779 Rutherland

City State Zip Code  
Southfield MI 48076-5855

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Dir Msg Bus Segment Perfm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A7576BCF40C874952B97**

Amount of Each Receipt this Period

140.00

Payroll Deduction: \$20.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

518.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 103 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Susan Kuypers**

Mailing Address 21524 Boyd Court

City

Macomb

State

MI

Zip Code

48044-3068

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A9E6A3765852743C58A0**

Amount of Each Receipt this Period

140.00

Payroll Deduction: \$20.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Laura OConnor**

Mailing Address 38966 Mt Kisco

City

Sterling Heights

State

MI

Zip Code

48310-3222

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

IT Manager I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A4C5C53C272334E23A56**

Amount of Each Receipt this Period

140.00

Payroll Deduction: \$20.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Michelle VanTorre-Tellier**

Mailing Address 2065 Wilshire Dr SE

City

Grand Rapids

State

MI

Zip Code

49506-4013

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager-sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AE28C2C1296124273A33**

Amount of Each Receipt this Period

140.00

Payroll Deduction: \$20.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

420.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 104 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Camille Forster**

Mailing Address 9035 Woodlore South Dr.

City State Zip Code  
Plymouth MI 48170-3499

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

MM / DD / YYYY  
06 / 26 / 2014

**Transaction ID : A5916810137454CB98A7**

Amount of Each Receipt this Period

133.00

Payroll Deduction: \$19.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Adam Dee**

Mailing Address 44879 Lindbergh

City State Zip Code  
Novi MI 48377-5943

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Director Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.00

Date of Receipt

MM / DD / YYYY  
06 / 26 / 2014

**Transaction ID : ADA8325994B1B468D923**

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Jeffrey Witzburg**

Mailing Address 9650 Winterset Circle

City State Zip Code  
Plymouth MI 48170-3273

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Business Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

MM / DD / YYYY  
06 / 26 / 2014

**Transaction ID : AA547672CFA044384BEB**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

462.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 105 OF 202

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Elizabeth Ziegler**

Mailing Address 2150 Langham

City	State	Zip Code
W Blmld	MI	48323-3842

FEC ID number of contributing federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2014

Transaction ID : A644986201340444F9D9

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. David Bulmer**

Mailing Address 11321 Morgan Street

City	State	Zip Code
Plymouth	MI	48170-4436

FEC ID number of contributing federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
IT Manager II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2014

Transaction ID : A6FE4541A17184A16A67

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Amy Richardson**

Mailing Address 20981 Laser Ln

City	State	Zip Code
South Lyon	MI	48178-9222

FEC ID number of contributing federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Manager Customer Service

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2014

Transaction ID : A98307D9E6643406A892

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

378.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 106 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

A. Jayne Scott

Mailing Address 2939 Muirwood Ct

City

Waterford

State

MI

Zip Code

48329-2396

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager Admin

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : ADFCEF16E886F45D4999

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. Troy Mounsey

Mailing Address 12632 Oneida Woods Trail

City

Grand Ledge

State

MI

Zip Code

48837-8995

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

Regional Director - Level II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A5843B7C62E9744D8BC4

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. Thomas Borgula

Mailing Address 35831 Candlewood

City

Sterling Heights

State

MI

Zip Code

48312-4125

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

IT Manager II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : AF17EDA379A1B4A8FBBE

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

378.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 107 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Charles Snyder**

Mailing Address 20949 Westfarm Lane

City State Zip Code  
 Northville MI 48167-9042

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Ecv Business Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : ADCCA5301487D4EDCA60**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Fred Richter**

Mailing Address 48777 Pebble Lane

City State Zip Code  
 Novi MI 48374-2741

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

IT Manager I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A932ABDEA1F894289B13**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Scott Hartman**

Mailing Address 3101 Avalon St

City State Zip Code  
 Lansing MI 48911-1806

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

Manager, Indemnity Payments

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A5F023FCCDBC84D46991**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 108 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Gwendolyn Parker**

Mailing Address 48165 Liberty Dr

City State Zip Code  
 Shelby Twp MI 48315-4061

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Associate Medical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 26 2014

Transaction ID : A42AEB04DF2164C879A9

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Jacquelyn Redding**

Mailing Address 6368 Morland St

City State Zip Code  
 Erie MI 48133-9624

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 26 2014

Transaction ID : AC2CABB2C440B4E67B01

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Sophia Quinn**

Mailing Address 241 Tuscany Dr

City State Zip Code  
 Portage MI 49024-9109

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager-sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 26 2014

Transaction ID : AE83E20E5AE9E44BB82F

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

378.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 109 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Constance Blachut**

Mailing Address 787 Deer Court

City State Zip Code  
Plymouth MI 48170-1743

FEC ID number of contributing federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Ecvt Business Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : AF1E117BD981841CAB88

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Dinesh Chawla**

Mailing Address 23123 Deziel St

City State Zip Code  
Saint Clair Shores MI 48082-2165

FEC ID number of contributing federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : AE66FAF9DDD884964BCA

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Earline Cunningham**

Mailing Address 28170 Shenandoah

City State Zip Code  
Southfield MI 48076-5588

FEC ID number of contributing federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Director Corp Compensation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A0FEF042546B24678BE5

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

378.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 110 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Clyde Scott**

Mailing Address 20636 Maple Lane

City

Grosse Pointe Woods

State

MI

Zip Code

48236-1524

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

Staff Counsel II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A86D0159EFE7F4E21971**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Shibu Samuel**

Mailing Address 22342 Heatheridge Ln

City

Northville

State

MI

Zip Code

48167-9319

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Consultant Product Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AE2D32A5A42954335ADB**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Patricia Mallett**

Mailing Address 10442 Hart Ave.

City

Huntington Woods

State

MI

Zip Code

48070-1128

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Consultant Product Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : ACD5949467CB545E49F6**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 111 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Derek Gemmel**

Mailing Address 31460 Adora Ln

City State Zip Code  
 Flat Rock MI 48134-3330

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Manager-sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : ACE0522AD308B4446A15

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Robert Reynolds**

Mailing Address 314 Hillcrest Ave

City State Zip Code  
 Grs Pt Fms MI 48236-3116

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Manager-sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A395EBBB8796542CE948

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Renji George**

Mailing Address 20840 Veranda Dr

City State Zip Code  
 Novi MI 48375-4778

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Strategy Perf Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A0EF5D6C30EA54154B21

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

378.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 112 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

A. Lorrie Keilman

Mailing Address 22044 Olmstead

City

Dearborn

State

MI

Zip Code

48124-2754

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A0A99F6EBF48241878FB

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. Philip Bone

Mailing Address 1497 Heights Rd

City

Lk Orion

State

MI

Zip Code

48362-2212

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager Sales Infrm

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : AE96A47F02CC94BDCAC4

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. Merrick Hurlbutt

Mailing Address 5604 Wood Valley

City

Haslett

State

MI

Zip Code

48840-9785

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

Manager, Claims

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A6C65651DB97F4E5E99C

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

378.00

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 113 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Annette Robertson**

Mailing Address 31264 Lund Ave

City

Warren

State

MI

Zip Code

48093-7917

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

IT Manager II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A7E1A6D93C46A4A89822**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Kathryn Winters**

Mailing Address 6423 Munger Road

City

Ypsilanti

State

MI

Zip Code

48197-9014

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A0797806D78F146BD812**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Diane Morin**

Mailing Address 51 Mohawk

City

Pontiac

State

MI

Zip Code

48341-1121

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

IT Manager I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A63488755EEA440B2B44**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 114 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

## **A. Lawrence Tomenello**

Mailing Address 38040 Huron Pointe Dr

City

Harrsn Twp

State

MI

Zip Code

48045-2831

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

IT Manager I

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AFEE583A85B1A4863AAA**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **B. Patrece Cade**

Mailing Address 1544 Pebble Beach Drive

City

Pontiac

State

MI

Zip Code

48340-1367

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : ADBD1A831C7CC4EDCA01**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **C. David Wendt**

Mailing Address 30580 South Hill Rd

City

New Hudson

State

MI

Zip Code

48165-9710

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

IT Manager I

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A01F4C51E653942E7BBA**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

378.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 115 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Corrie Beaverson**

Mailing Address 12219 Landers Dr

City

Plymouth

State

MI

Zip Code

48170-3549

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Strategy Perf Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A367A7B954D8F4EDC98E

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Eric Napier**

Mailing Address 14160 Helen St.

City

Southgate

State

MI

Zip Code

48195-1970

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager It Audit &amp; Adv Svc

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A507A1A01E98A434AA60

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Laurie McIntee**

Mailing Address 3356 S. Blvd., E.

City

Blmfld Hls

State

MI

Zip Code

48304-1155

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : AAC5DE09178BA44F3B67

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

378.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 116 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

A. Jason Smith

Mailing Address 11536 Aspen Dr

City  
PlymouthState  
MIZip Code  
48170-4597FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Program Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A12C630B8C7B24FD38CC

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. Emma Bissonnette

Mailing Address 32417 Desmond

City  
WarrenState  
MIZip Code  
48093-1154FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A33A0C3849C704393ACF

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. Katherine Labadie

Mailing Address 40269 Sandy Dr

City  
Clinton TownshipState  
MIZip Code  
48038-4718FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A1F9754FDC29E4C2B81F

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

378.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 117 OF 202  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Michael Mattei**

Mailing Address 6088 Glen Eagles

City

W Blmfld

State

MI

Zip Code

48323-2212

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

IT Manager I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AC05DFA9AD7634EDBAF4**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Helen Huseltine**

Mailing Address 22112 Love St

City

St Clair Shores

State

MI

Zip Code

48082-2474

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Health Care Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A364B18A18FB94B62879**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Jerry Johnson**

Mailing Address 22076 Chatsford Circuit

City

Southfld

State

MI

Zip Code

48034-2119

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A5BE080E31F334B6289A**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 118 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Maureen Beauregard**

Mailing Address 115 E Seventh St

City

Monroe

State

MI

Zip Code

48161-1307

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AD35171AD99D54ADA947**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. James Foster**

Mailing Address 900 Washington Rd

City

Grosse Pointe

State

MI

Zip Code

48230-1292

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Portfolio Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A34641DF2EE314484922**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Sean Drate**

Mailing Address 722 Albany

City

Ferndale

State

MI

Zip Code

48220-1829

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Commercial Govt Bus Cons

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AC3B7A11057F3487280D**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 119 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Carol Purdy**

Mailing Address 36989 Fox Glen

City

Farmington Hills

State

MI

Zip Code

48331-1803

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Mgr Diversity & Inclusion

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

Transaction ID : AEE0EAB32471B4E0FA34

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Rajesh Vunnam**

Mailing Address 24436 Chippewa

City

Farmington Hills

State

MI

Zip Code

48335-2280

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

Transaction ID : AB70938753A0D442592D

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Lorelee McCleary**

Mailing Address 3753 Ivy Lane

City

Dewitt

State

MI

Zip Code

48820-9231

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

Manager, IS Quality Assurance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

Transaction ID : A12CB9169EE6C45D09D5

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 120 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Peter Dilella**

Mailing Address 21660 Summerfield Drive

City State Zip Code  
 Macomb MI 48044-2287

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager Corporate Planning

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A1E71141CBF844D0F802

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Harry Nowell III III**

Mailing Address 598 Longfellow Dr

City State Zip Code  
 Troy MI 48085-4815

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A897BA1E0248C4A0FAAE

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Diane Cesarz**

Mailing Address 18525 Shadyside St

City State Zip Code  
 Livonia MI 48152-3245

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

IT Manager I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : ACA26B7FEBC04DD495A

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

378.00

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 121 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

## **A. Michele Gladany**

Mailing Address 1143 Paddock Dr

City

South Lyon

State

MI

Zip Code

48178-1896

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Sales Force Training Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AA483A4269745482190C**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **B. Peggy Gunns**

Mailing Address 722 E Columbia St

City

Mason

State

MI

Zip Code

48854-1306

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager Service Center Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AAD01F9EED07F4E8CA34**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **C. Gretchen White**

Mailing Address 4165 Dallas

City

Holt

State

MI

Zip Code

48842-1735

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager-sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AC7014E618C664DDBA2B**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 122 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Belinda Bolton**

Mailing Address 23240 Purdue Ave

City

Farmington Hills

State

MI

Zip Code

48336-3650

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager Medical Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A158BF46CACB540C098F**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Charlene Rayburn**

Mailing Address 32119 Willow Way

City

Chesterfield

State

MI

Zip Code

48047-6114

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A06A7EB61C3494E96B7D**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Tracy Woodard**

Mailing Address 23993 Thorn Dr

City

Flat Rock

State

MI

Zip Code

48134-6038

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager-sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A3DA035EBB184475781A**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 123 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Branden Staton**

Mailing Address 11205 S Morrice Road

City State Zip Code  
Morrice MI 48857-9786

FEC ID number of contributing federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

Manager, Infrastructure

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A6CB0FC3A4C7D493F944

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Robert Saxton**

Mailing Address 2826 Lamoreaux Ln

City State Zip Code  
Holt MI 48842-9730

FEC ID number of contributing federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

Manager, En Fc&amp;Prop Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : AB3FD6CD23CFD404B977

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Patricia Hoerner**

Mailing Address 32402 Bonnet Hill Rd

City State Zip Code  
Farmington Hills MI 48334-3412

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : AD60F83B0247C432BB31

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 124 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Susan Remisiewicz**

Mailing Address 18432 Stamford St

City Livonia State MI Zip Code 48152-4905

FEC ID number of contributing federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
IT Delivery Manager I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A3ED7852307E744CAAC6**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Susan Tousignant**

Mailing Address 21620 River Ridge Trail

City Farmington Hills State MI Zip Code 48335-4621

FEC ID number of contributing federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

06 / 12 / 2014

**Transaction ID : A6387F5D6A9344D98BC0**

Amount of Each Receipt this Period

108.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Donna Waller**

Mailing Address 894 Avon Court

City Grs Pt Wds State MI Zip Code 48236-1239

FEC ID number of contributing federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Dir Center of Exc Stars Pgrm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A8C9AFF19620E494A86F**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

360.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 125 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

## **A. Steven Morrison**

Mailing Address 4725 Valley View South

City State Zip Code  
 West Bloomfield MI 48323-3365

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Strategy Perf Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

Transaction ID : AEB32C3B810D54DAB961

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **B. Marla Larkin**

Mailing Address 1300 E Lafayette St  
 Apt 108

City State Zip Code  
 Detroit MI 48207-2918

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

Transaction ID : A50E196B194A84A1AA48

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **C. Joann Kochis**

Mailing Address 8347 Thorntree Dr.

City State Zip Code  
 Grosse Ile MI 48138-1515

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

Transaction ID : A168CC3A4EC014D038E3

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 126 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Jonathan Schmidt**

Mailing Address 11590 Hibiscus Lane

City

Grand Ledge

State

MI

Zip Code

48837-8178

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A17031BEF250246B3AB7**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Kimberly Nerowski**

Mailing Address 32755 Adam Brown Dr

City

Rockwood

State

MI

Zip Code

48173-8785

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A1B4F556D5CF8400B8FC**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Michelle Easton**

Mailing Address 22806 Sherry Dr

City

Flat Rock

State

MI

Zip Code

48134-9064

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A990364D6344141DFB9B**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 127 OF 202

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Timothy Rafferty**

Mailing Address 14128 Thames

City

Shelby Twp

State

MI

Zip Code

48315-5437

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	1	4

Transaction ID : AA6EAE8048B4C4357959

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Debra Knapp**

Mailing Address 1651 Devonshire Dr

City

Troy

State

MI

Zip Code

48098-4378

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	1	4

Transaction ID : A4006B75D7A334D3BB64

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Rosemary Gundel**

Mailing Address 52105 Loon Ct

City

Shelby Township

State

MI

Zip Code

48315-6946

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

IT Manager II

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	1	4

Transaction ID : ACB1A4EB36BBC44B39B0

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 128 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

A. William Albert

Mailing Address 6785 White Pines Drive

City State Zip Code  
 Brighton MI 48116-9170

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Director - Regional Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 26 2014

Transaction ID : AD2341F68B6874F34B5E

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. Jessica Carr

Mailing Address 37479 Eagle Dr

City State Zip Code  
 Livonia MI 48150-5054

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 26 2014

Transaction ID : A39B4FE5372FD45B2A2E

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

c. Sharon Zuschlag

Mailing Address 3976 Wexford Dr

City State Zip Code  
 Wixom MI 48393-1193

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Commercial Govt Bus Cons

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 26 2014

Transaction ID : AFD620FB7EAA44140875

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

378.00

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 129 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Diane Flint**

Mailing Address 14240 Talbot

City

Oak Park

State

MI

Zip Code

48237-1183

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A299A74F6944D48FBA01**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Angela Anderson**

Mailing Address 1010 Sutherland St

City

Plymouth

State

MI

Zip Code

48170-2043

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager Admin

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A70797CDA851C4185BF4**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Richard Baharozian**

Mailing Address 2525 Farm Brook Trail

City

Oxford

State

MI

Zip Code

48370-2305

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

IT Manager I

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2A9BD73DD2A549A1BFD**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

378.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 130 OF 202

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. John Schlinker**

Mailing Address 2426 Burcham Drive

City

East Lansing

State

MI

Zip Code

48823-7246

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

Manager, Subrogation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	1	4

Transaction ID : A42FCFBA914F5471DB11

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Theresa Wherrett**

Mailing Address 46533 Polo Drive

City

Canton

State

MI

Zip Code

48187-1686

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Finance Business Partner

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	1	4

Transaction ID : A0287995DE373462BB12

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Barbara Mooradian**Mailing Address 2621 Somerset  
Apt 201

City

Troy

State

MI

Zip Code

48084-4019

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	1	4

Transaction ID : A39E9F4136CF44BB985F

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

378.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 131 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

A. Aaron MacDonald

Mailing Address 26510 Dundee Rd

City

Huntington Woods

State

MI

Zip Code

48070-1321

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager-sales

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A95611099A95648FE837

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. Catherine Hodges

Mailing Address 38139 Mallory

City

Livonia

State

MI

Zip Code

48154-1109

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Strategy Perf Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A3CF134BB92DF40D4AC8

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. Kevin Law

Mailing Address 1321 Mill Creek Dr

City

Waterford

State

MI

Zip Code

48327-3090

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager - Talent Acq

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A068E4930E4374471B10

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

378.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 132 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

A. Eileen Kostanecki

Mailing Address 6012 27th Rd N

City  
ArlingtonState  
VAZip Code  
22207-1234FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Health Policy Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A259FC70004234BAFA2B

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. Dana Newton

Mailing Address The Franklin 28675 Franklin Rd  
Apt 424City  
SouthfieldState  
MIZip Code  
48034-1605FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager Customer Service

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : AF4D4689B4A0548519EB

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. Gino Polidori Jr

Mailing Address 2170 Antique Ct

City  
CantonState  
MIZip Code  
48187-5826FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : AB94C5B2F0E3A43CC851

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 133 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. James Robb**

Mailing Address 3413 Wolverine Dr

City State Zip Code  
Troy MI 48083-6803

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Special Asst To CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AAC2916D08614C62A13**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Patricia Slisinger**

Mailing Address 34518 Morningdale Dr

City State Zip Code  
Strlg Hts MI 48312-5744

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

06 / 12 / 2014

**Transaction ID : AB7FE486982BA4CF2853**

Amount of Each Receipt this Period

108.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Michael Zell**

Mailing Address 5411 Bright Creek Court

City State Zip Code  
Flint MI 48532-2254

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2B28EBC11C064835B4B**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

360.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 134 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Terrence Rush**

Mailing Address 47185 Marisa Ct

City  
Plymouth

State Zip Code  
MI 48170-3491

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Manager-regional Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A909BCEBED5374CF3B53**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Sharon Brock**

Mailing Address 39542 Dorchester Cir

City  
Canton

State Zip Code  
MI 48188-5014

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Manager-key Account

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AD1CEC1C1CAD64F3ABA8**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Adam Quesnel**

Mailing Address PO Box 293

City  
Shepherd

State Zip Code  
MI 48883-0293

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Manager Enterprise Security

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A811BD5D689B7430594B**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 135 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Donald Farr**

Mailing Address 989 W Allen Road

City

Howell

State

MI

Zip Code

48855-8362

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

Supervisor, Interim

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A41E540F074D8420892B**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. John Quigley**

Mailing Address 29226 Manhattan St.

City

Saint Clair Shores

State

MI

Zip Code

48081-1104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A77FB2ACC9759408FA87**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Sharon Oneill**

Mailing Address 7228 Gully

City

Dearbn Hts

State

MI

Zip Code

48127-3807

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A728D6E2BF12142518DA**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 136 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Peter Albert**

Mailing Address 30711 Delton

City

Madison Hts

State

MI

Zip Code

48071-2109

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A3C323F72CAD44132AB4**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Charmaine Stevens**

Mailing Address 47011 Mornington Rd

City

Canton

State

MI

Zip Code

48188-3000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

IT Manager II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2E1B064793A54E73A2F**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**c. Sarilyn Hogan**

Mailing Address 4180 Cross Road

City

White Lake

State

MI

Zip Code

48386-1207

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A6BED965A5BCB4CEB8C9**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 137 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Laverne Tarver**

Mailing Address 35759 N Grandview Ct

City State Zip Code  
 Farmington Hills MI 48335-2414

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Manager Service Center Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A6F1E2A2FD4D243D68BE

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. David Casillas**

Mailing Address 3020 Syracuse

City State Zip Code  
 Dearborn MI 48124-4527

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : ABC03E24DDA2A4C10B18

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Phyllis Browne**

Mailing Address 6116 Bishop

City State Zip Code  
 Lansing MI 48911-6204

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A38FB5F7B62F34034893

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

378.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 138 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

## **A. Kurt Prettenhofer**

Mailing Address 1701 Dover St

City State Zip Code  
Ferndale MI 48220-3108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AF2AECB1F976B44F1AE0**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **B. Joseph Radtka**

Mailing Address 47305 Reene Dr

City State Zip Code  
Belleville MI 48111-1067

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Director - Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A7D8DAA53A34E4D4F918**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **C. Ara Rafaelian**

Mailing Address 245 Crest

City State Zip Code  
Ann Arbor MI 48103-4315

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Health Care Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AFFF1AC0B615748E4A0F**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 139 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Tiffany Moss**

Mailing Address PO Box 1032

City State Zip Code  
 Mount Clemens MI 48046-1032

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Manager Service Center Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : AADD020760BD34EC4B09

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Duane Pretzer Jr**

Mailing Address 30329 Iroquois

City State Zip Code  
 Warren MI 48088-5028

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Manager Enterprise Security

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : AAB64F9B6FB714ED985A

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Michael Cover**

Mailing Address 2629 Lamplighter Ln

City State Zip Code  
 Bloomfield Hills MI 48304-1936

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A4EC14BB4942A450EAD2

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

378.00

TOTAL This Period (last page this line number only)..... ►

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 140 OF 202  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

### A. Cheri Lehto

Mailing Address 4051 Wakefield Rd

City State Zip Code  
Berkley MI 48072-1409

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

MM / DD / YYYY  
06 / 26 / 2014

Transaction ID : AC982DF63B62B4911A4E

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

### B. Nancy Bennett

Mailing Address 24121 Rosewood

City State Zip Code  
Oak Park MI 48237-2271

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

MM / DD / YYYY  
06 / 26 / 2014

Transaction ID : A406CB10CCE704D84BDA

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

### C. Craig Millard

Mailing Address 1072 Blue Ridge Drive

City State Zip Code  
Clarkston MI 48348-4091

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Health Care Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

MM / DD / YYYY  
06 / 26 / 2014

Transaction ID : AFB47BF9CB9784A109AF

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 141 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Stephanie Beres**

Mailing Address 3138 Gloucester Drive

City State Zip Code  
 Troy MI 48084-2720

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : ABE41C24A0E9E4994852

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Jason Loepp**

Mailing Address 1953 Evergreen St SE

City State Zip Code  
 Grand Rapids MI 49506-4115

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Manager-sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : AF76ECDE158BF48B7A36

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Kevin Monaghan**

Mailing Address 130 S. Connecticut Ave.

City State Zip Code  
 Royal Oak MI 48067-2923

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 IT Architect Sr.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : ADC0B923D7ABD44A7B49

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 142 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Brian Gabriel**

Mailing Address 56317 Ashbrooke Dr W

City State Zip Code  
Shelby Township MI 48316-5582

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Mgr Corp Business Continuity

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

MM / DD / YYYY  
06 / 26 / 2014

**Transaction ID : A47F4E02C4C674E539F3**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Joseph Lee**

Mailing Address 3244 Parker Dr

City State Zip Code  
Royal Oak MI 48073-6917

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
IT Manager I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

MM / DD / YYYY  
06 / 26 / 2014

**Transaction ID : A028DCB4B7A634C329B8**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. James Demerath**

Mailing Address 18655 Parkside St

City State Zip Code  
Detroit MI 48221-2208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Corporate Tax Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

MM / DD / YYYY  
06 / 26 / 2014

**Transaction ID : AD543985798C84537849**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 143 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Lisa Redick**

Mailing Address 14830 Belmont

City

Allen Pk

State

MI

Zip Code

48101-1604

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Health Care Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A45D579ABE2F049EB962**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Brad Baty**

Mailing Address 4733 Bluebird Court

City

Dexter

State

MI

Zip Code

48130-9372

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

IT Manager II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A36B04B4C82F345A8930**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Martha Stubbs**

Mailing Address 5946 Vistamar Rd

City

Toledo

State

OH

Zip Code

43611-1044

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Actuary Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A6B65A70268D94E959DE**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

378.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 144 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Dan Zolkowski**

Mailing Address 1841 Ridgewood Drive

City

East Lansing

State

MI

Zip Code

48823-2939

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

Staff Counsel III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A0EC78A1D1D5A43D7BF1**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Anne McMahon**

Mailing Address 60696 Lyon Trail South

City

South Lyon

State

MI

Zip Code

48178-9058

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

IT Delivery Manager II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A1DDD1B7F130548BCADF**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Matthew Zelman**

Mailing Address 633 S Dorchester Ave

City

Royal Oak

State

MI

Zip Code

48067-4047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Project Mgr Product Analysis

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A7B5FAE93AB2F4521838**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 145 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Jeffrey Holzhausen**

Mailing Address 2523 Wheeler Dr

City

Chelsea

State

MI

Zip Code

48118-9224

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AF63F6BB17F664A0F8D5**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Dennis Uhnay**

Mailing Address 351 S. Cranbrook Rd

City

Birmingham

State

MI

Zip Code

48008-1590

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Dir Learning & Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A0C0FBFA2217E4538AE0**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Donna Stache**

Mailing Address 3640 Worthington Ct

City

Rochester Hills

State

MI

Zip Code

48309-1180

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Mgr Primary & Secondary Res

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AB7E697C27848459AA0F**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 146 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Dean Swanson**

Mailing Address 86 Webb St

City State Zip Code  
Troy MI 48098-4632

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A5EECB8E73A8642B8B3A**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Brian Mabie**

Mailing Address 42309 Oakland Drive

City State Zip Code  
Canton MI 48188-5218

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Clinical Pharmacist- Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A6F158955C82447FBBFC**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Walter Matthews**

Mailing Address 12726 Mahogany Way

City State Zip Code  
Dewitt MI 48820-7879

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Accident Fund Insurance Company of Ame

Occupation  
Managing, Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AD9E79D57CADC4F2DA6C**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 147 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Karen Racinski**

Mailing Address 10000 Cedar Shrs

City

White Lake

State

MI

Zip Code

48386-2821

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

IT Manager I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AF0A8D6ACCFD5469798B**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Susan Schrot**

Mailing Address 36242 Jared

City

Strlg Hts

State

MI

Zip Code

48312-3237

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Administrative Mgr - BCN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AF18DC71998B548258C3**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Richard Phillips**

Mailing Address 40101 W Huron River

City

Romulus

State

MI

Zip Code

48174-4811

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager Admin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AAB9310F3713C418BBCA**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 148 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Henry Lague**

Mailing Address 22421 Normandy Ave

City State Zip Code  
 Eastpointe MI 48021-2513

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Manager Enterprise Security

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

Transaction ID : AD79904EEB53040138A3

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Alicia Sobel**

Mailing Address 1579 Crestline Dr

City State Zip Code  
 Troy MI 48083-5502

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 ONHR Consulting Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

Transaction ID : AE957EEFC074D4ED1984

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Joseph Lieblang**

Mailing Address 22337 Tenny

City State Zip Code  
 Dearborn MI 48124-2744

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

Transaction ID : AE90F2E13ACED4A5B85A

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 149 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Robin Wright King**

Mailing Address 3 Cumberlane Ct

City

Dearborn

State

MI

Zip Code

48126-4201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A8C221000E5A147CABB0**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Laura Dancsok**

Mailing Address 8253 Colony Dr  
 #22

City

Grosse Ile

State

MI

Zip Code

48138-1733

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager-sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A8F7705061FA847DFA62**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Paula Mutch**

Mailing Address 46344 Turnbuckle Ln

City

Macomb

State

MI

Zip Code

48044-6204

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager-key Account

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AD2739EBAE4BE4974B2E**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 150 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Rollyn Llewellyn II**

Mailing Address 5897 Donaldson Dr

City State Zip Code  
 Troy MI 48085-3109

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 IT Manager II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 26 2014

Transaction ID : A1C86A8DC0D184673AC3

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Michael Reinholm**

Mailing Address 1249 Larkmoor Blvd

City State Zip Code  
 Berkley MI 48072-1990

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Accident Fund Insurance Company of Ame

Occupation  
 Staff Counsel III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 26 2014

Transaction ID : A5E1EBE45E8C04D3899D

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Duwayne Mills**

Mailing Address 1076 Bangor Rd

City State Zip Code  
 Waterford MI 48328-4718

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 26 2014

Transaction ID : A0F1C2B68544B45F5BF4

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 151 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Karen Anderson**

Mailing Address 47610 Red Run Dr

City State Zip Code  
Canton MI 48187-5490

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Blue Cross Blue Shield of Michigan Mgr- Employee & Labor Rel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AB7BB55BDD954A50B1E**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Patricia Fritsch**

Mailing Address 37149 Weymouth

City State Zip Code  
Livonia MI 48152-4095

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Blue Cross Blue Shield of Michigan IT Delivery Manager II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A33EACFE16C51429F9AA**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. James Haskins IV**

Mailing Address 19365 Warrington Dr

City State Zip Code  
Detroit MI 48221-1882

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Blue Cross Blue Shield of Michigan Admin Mgr BCN Clinical Aff

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A430542063FF2407B937**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 152 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Adonna Mcfall**

Mailing Address PO Box 3895

City  
Southfield

State Zip Code  
MI 48037-3895

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Manager Customer Service

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

Transaction ID : AD24FF907424E4FD1AE3

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Diana Glaab**

Mailing Address 24805 Belton Ln

City  
Dearbn Hts

State Zip Code  
MI 48127-1377

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Auto National Fin Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

Transaction ID : AB7ACCEAB0E264C309A0

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Kevin Kihn**

Mailing Address 10529 Stark

City  
Livonia

State Zip Code  
MI 48150-2619

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Health Care Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

Transaction ID : A00C7196FC37E4254951

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 153 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

## **A. Dianne Malmgren**

Mailing Address 14729 Dane Ct

City State Zip Code  
 Strlg Hts MI 48312-4415

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

Transaction ID : AE02668AB53C24140B51

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **B. Bradley Anderson**

Mailing Address 38354 Mallast St

City State Zip Code  
 Harrison Township MI 48045-2173

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 IT Delivery Manager II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

Transaction ID : A57872195EE004D25BBC

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **C. Vicente Vazquez III**

Mailing Address 1169 W. Boston Blvd

City State Zip Code  
 Detroit MI 48202-1409

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Application Dev Technical Lead

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

Transaction ID : A24ACDA616FBD4D7D943

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 154 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Jennifer Nosakowski**

Mailing Address 1377 Morning Mist Dr

City

Howell

State

MI

Zip Code

48843-7012

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager-account

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A1FE7F6410A1D40FDB5E**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Jessica Donaldson**

Mailing Address 31117 Orangelawn St

City

Livonia

State

MI

Zip Code

48150-2926

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager Admin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A03213890EB5C42ADB83**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Lorna Koscielny**

Mailing Address 35560 Ann Arbor Trail

City

Livonia

State

MI

Zip Code

48150-3596

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Business Relationship Mgr I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AFEC EE21C49304DC1ADD**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 155 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

A. Mohammad Zafar

Mailing Address 4017 Normanwood Dr

City

West Bloomfield

State

MI

Zip Code

48323-1748

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Physician Consultant

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : AD98D80862A6B400DBDE

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. Kerri Larkin

Mailing Address 21882 Chase Dr

City

Novi

State

MI

Zip Code

48375-4766

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Health Care Manager

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A381263597B4D43239F6

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. Concettina Patsalis

Mailing Address 15974 Jupiter Hills Dr

City

Northville

State

MI

Zip Code

48168-8628

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : AA3EFAA1A29B145E4B65

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

378.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 156 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Michael Schneider**

Mailing Address 27465 Shagbark Dr

City

Southfield

State

MI

Zip Code

48076-7420

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2C3FFC0A0BD64BB6A11**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Laurence Binder**

Mailing Address 32300 Maryland

City

Livonia

State

MI

Zip Code

48150-3814

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Technology Consultant II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A42FCB5B113E24E4C836**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Steven Goble**

Mailing Address 355 Orchard Dr

City

Northville

State

MI

Zip Code

48167-1317

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Consultant - Business

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AF965AFFFC6EB465C934**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 157 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Wanda Czinski**

Mailing Address 11121 Butler Rd

City State Zip Code  
 Willis MI 48191-9650

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Manager Finance Shared Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

Transaction ID : A4BAF947285AD4910876

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Craig Smith**

Mailing Address 8310 Flagg View Dr

City State Zip Code  
 Powell OH 43065-8147

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Manager-key Account

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

Transaction ID : A10CBCA23F0514E3BA57

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Catherine Whitford**

Mailing Address 1250 W Marshall Rd

City State Zip Code  
 St Johns MI 48879-9413

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Accident Fund Insurance Company of Ame

Occupation  
 Manager, MM Pract and Strategy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

Transaction ID : AFCBF405387344299904

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 158 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Erica Krieger**

Mailing Address 5768 Firwood Dr

City State Zip Code  
Troy MI 48098-2552

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Dir STARS Pg Aytcs & Pfm Mgt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2A5A55094BBA4E62B7D**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Kathleen Wodecki**

Mailing Address 7640 Barnsbury

City State Zip Code  
W Blmfld MI 48324-3612

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
IT Manager I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A102B79AF3EB444D780C**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Andrew Hazel**

Mailing Address 303 E Lovett St

City State Zip Code  
Charlotte MI 48813-1633

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Accident Fund Insurance Company of Ame

Occupation  
Enterprise Risk Mgmt Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A5A28709EE51B4186B62**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 159 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

## **A. Jane Waters**

Mailing Address 3777 Lone Pine  
6

City State Zip Code  
Holt MI 48842-7719

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Accident Fund Insurance Company of Ame

Occupation  
Manager, New Markets

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AD3B2A61AECA94E6E844**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **B. Lisa Drayton**

Mailing Address 9335 Sanilac

City State Zip Code  
Detroit MI 48224-1245

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A3C6342B52B1641E2BB9**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **C. Mary Mackenzie**

Mailing Address 1534 Creal Crescent

City State Zip Code  
Ann Arbor MI 48103-2420

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Accident Fund Insurance Company of Ame

Occupation  
Staff Counsel II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A915F322D54DA4F81B06**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 160 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Jaime Mullen**

Mailing Address 5935 Cartago Drive

City State Zip Code  
 Lansing MI 48911-6480

FEC ID number of contributing federal political committee.

C

Name of Employer

Accident Fund Insurance Company of Ame

Occupation

Strategic Planning Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 26 2014

Transaction ID : A24C3B1D9E08F47809C4

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Trine Martinez**

Mailing Address 43585 Serenity Dr.

City State Zip Code  
 Northville MI 48167-8932

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager-regional Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 26 2014

Transaction ID : ACFE5EA75D24B329B6

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Laurens De Jong**

Mailing Address 7990 Lake Crest Dr

City State Zip Code  
 Ypsilanti MI 48197-6751

FEC ID number of contributing federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

IT Team Lead II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 26 2014

Transaction ID : A038A651E34AC4436AC4

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

378.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 161 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Timothy Noonan**

Mailing Address 14328 Mackinaw Trl

City

Grand Haven

State

MI

Zip Code

49417-7729

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager-sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AF85DA693CF1B475EB21**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Susan Gillette**

Mailing Address 460 Orange

City

Wyandotte

State

MI

Zip Code

48192-6226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A7399D564156E4BCC8E4**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Sandra Nielsen-Gessert**

Mailing Address 9585 Firwood

City

South Lyon

State

MI

Zip Code

48178-8804

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A3D1A13B868F440A7B39**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

378.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 162 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Shankarshna Madhavan**

Mailing Address 5821 Muirfield Ln

City State Zip Code  
Troy MI 48085-6128

FEC ID number of contributing federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Strategy Perf Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : AD4582F1BA01D4F14BCB

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Huda Fadel**

Mailing Address 2340 St Francis Drive

City State Zip Code  
Ann Arbor MI 48104-4807

FEC ID number of contributing federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Consultant Coa Activities

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A1F9729BF376F438B982

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Angela Williams**

Mailing Address 50409 Aldwych St

City State Zip Code  
Macomb MI 48044-1126

FEC ID number of contributing federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
IT Manager II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A054A27BD7B1549C1A21

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

378.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER: PAGE 163 OF 202

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Vanette Hill**

Mailing Address 6026 Bay Hill Ct

City	State	Zip Code
Romulus	MI	48174-6424

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 Blue Cross Blue Shield of Michigan

 Occupation  
 IT Manager I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2014

Transaction ID : A293A5C7CB0134BAE8C2

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Taryn Szydlowski**

Mailing Address 5723 Martell Dr

City	State	Zip Code
Troy	MI	48085-3162

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 Blue Cross Blue Shield of Michigan

 Occupation  
 Manager Medical Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2014

Transaction ID : A09ED05F7FEE94ED6838

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Frank Maslowski**

Mailing Address 223 N Military St

City	State	Zip Code
Dearborn	MI	48124-1034

FEC ID number of contributing federal political committee.

C

 Name of Employer  
 Blue Cross Blue Shield of Michigan

 Occupation  
 Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2014

Transaction ID : A87297F1D015548EE872

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

378.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 164 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Kathryn Grinsteiner**

Mailing Address 7746 Coconut Dr

City

Jenison

State

MI

Zip Code

49428-9141

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A47008D64EF63404D83F**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Joseph Ewing**

Mailing Address 44282 Nowland Dr

City

Canton

State

MI

Zip Code

48188-1792

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

IT Manager I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A7ECAEC0A61104A44A93**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Marla Nicholas**

Mailing Address 144 Mohawk

City

Dearborn

State

MI

Zip Code

48124-1322

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

IT Manager II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A55D3BB303B6F4021ABB**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 165 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

## **A. Lablance Winder**

Mailing Address 31867 Hoover Rd

City

Warren

State

MI

Zip Code

48093-1717

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A1FE31D14A44A45C8B6A**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **B. Yvonne Moore**

Mailing Address 14889 Brookside

City

Van Buren Twp

State

MI

Zip Code

48111-5199

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager-key Account

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : ADE830530F6BE472C851**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **C. Anthony Russo**

Mailing Address 23003 Brookdale

City

St Clair Sh

State

MI

Zip Code

48082-2138

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A0A5A83B4E6394B11B87**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 166 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. David Keener**

Mailing Address 823 W Oakridge

City State Zip Code  
 Ferndale MI 48220-2753

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Manager - Pharmacy Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A24CD0EBA09D840A790D

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Patricia Soyemi**

Mailing Address 32151 W 12 Mile Rd

City State Zip Code  
 Farmington Hills MI 48334-3502

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Manager-key Account

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A4B72BEB0E96E4E89976

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Reina Navarra**

Mailing Address 43529 Bayfield

City State Zip Code  
 Clntrn Twp MI 48038-1303

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 26 / 2014

Transaction ID : A330560CC4B0F4789A41

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

378.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 167 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

## **A. David Murray**

Mailing Address 4197 3 Oaks Drive  
Apt 1A

City State Zip Code  
Troy MI 48098-4573

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

MM / DD / YYYY  
06 / 26 / 2014

**Transaction ID : AD7CDA47454FB4F42A06**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **B. Sandra Walther**

Mailing Address 50682 Harbour View Dr N

City State Zip Code  
New Baltimore MI 48047-4344

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Product Consultant CDH BCN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

MM / DD / YYYY  
06 / 26 / 2014

**Transaction ID : A74385643613E482DAAD**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

## **C. Mary Driessche**

Mailing Address 6026 Meadowlark St NE

City State Zip Code  
Rockford MI 49341-9221

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Mgr- Employee & Labor Rel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

MM / DD / YYYY  
06 / 26 / 2014

**Transaction ID : AEA80265B4F0B4A2D8C4**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 168 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

A. Daniel Daly

Mailing Address 3299 Jasper Ct

City State Zip Code  
 Troy MI 48083-5780

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 26 2014

Transaction ID : ABB6BACFEF4BE441AA6;

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

B. Richard Williams

Mailing Address 43971 Columbia Dr

City State Zip Code  
 Clinton Twp MI 48038-1327

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 26 2014

Transaction ID : A047B631E832B4AA8968

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

C. Steven Gray

Mailing Address 2252 Devonshire

City State Zip Code  
 Bloomfield MI 48302-0623

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Manager-sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 26 2014

Transaction ID : A864C96EDC237425DA59

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

378.00

TOTAL This Period (last page this line number only)..... ►



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 169 OF 202

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Bryant Greene**

Mailing Address 1726 Huntington Blvd

City	State	Zip Code
Grosse Pointe Woods	MI	48236-1916

FEC ID number of contributing federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Attorney Associate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2014

Transaction ID : AF5D175442DB347A3862

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. TeJuan Yelder**

Mailing Address 3032 Lawton St

City	State	Zip Code
Detroit	MI	48216-1134

FEC ID number of contributing federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Manager Service Center Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2014

Transaction ID : AE711711BCBC4469EA93

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Beth Benson**

Mailing Address 15860 Reedmere Ave

City	State	Zip Code
Beverly Hills	MI	48025-5672

FEC ID number of contributing federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of Michigan

Occupation  
Manager Admin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2014

Transaction ID : A97F335A057F543F1A3A

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 170 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Julie Weber**

Mailing Address 42660 Steepleview St

City State Zip Code  
 Northville MI 48168-2090

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Blue Cross Blue Shield of Michigan

Occupation  
 Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A8904CFF564314613A1F**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Marsha Tracy**

Mailing Address 12451 Oakland Hills

City State Zip Code  
 DeWitt MI 48820-8302

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Accident Fund Insurance Company of Ame

Occupation  
 Staff Counsel II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : AA9A00D910B91453C9C4**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Lee Anne Latchaw**

Mailing Address 2110 Waite Ave

City State Zip Code  
 Kalamazoo MI 49008-1718

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Accident Fund Insurance Company of Ame

Occupation  
 Managing Staff Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A4CC8B6B95B524F22B48**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 171 OF 202

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

**A. Gregory Wilson**

Mailing Address P O BOX 252462

City

West Bloomfield

State

MI

Zip Code

48325-2462

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A6904DA5F214C4EA3967**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Kathy Alden**

Mailing Address 2409 Kensington

City

Lansing

State

MI

Zip Code

48910-2854

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A6FFA47F30284491E878**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Elaine Foster**

Mailing Address 10180 Creekwood Circle

City

Plymouth

State

MI

Zip Code

48170-3824

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Health Care Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 26 / 2014

**Transaction ID : A2CD60DBD8DC44F45BA1**

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

378.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 172 OF 202

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Hope Anderson**

Mailing Address 30640 Balewood St

City

Southfield

State

MI

Zip Code

48076-1569

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

HCV Bus Sgmnt Consult

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A27A6F5DEAF61466BA16

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. Julia Kuks**

Mailing Address 1073 Magnolia

City

Inkster

State

MI

Zip Code

48141-1731

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Manager Sales Infrm

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A2D29E6DDC90E4009A97

Amount of Each Receipt this Period

126.00

Payroll Deduction: \$18.00/Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. Joseph Muzingo**

Mailing Address 344 University Place

City

Grosse Pointe

State

MI

Zip Code

48230-1636

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blue Cross Blue Shield of Michigan

Occupation

Attorney

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

203.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 26 / 2014

Transaction ID : A01500D8C427D4031B09

Amount of Each Receipt this Period

203.00

Payroll Deduction: \$29.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

455.00

TOTAL This Period (last page this line number only)..... ►

97038.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 173 OF 202

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Blue Cross Blue Shield of Michigan PAC**

Full Name (Last, First, Middle Initial)

## **A. MIKE ROGERS FOR CONGRESS**

Mailing Address 123 EAST 13TH STREET

City State Zip Code  
ANNISTON AL 36201

FEC ID number of contributing  
federal political committee.

**C** C00367862

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

**06** / **12** / **2014**

**Transaction ID : A13736303226B4A76874**

Amount of Each Receipt this Period

3500.00

Refund of Contribution

Full Name (Last, First, Middle Initial)

## **B. Dave Camp For Congress**

Mailing Address 5915 Eastman Ave. Suite 100  
5915 Eastman Ave. Suite 100

City State Zip Code  
Midland MI 48640-6824

FEC ID number of contributing  
federal political committee.

**C** C00347476

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**05** / **07** / **2014**

**Transaction ID : AEDA00D429F04480C87B**

Amount of Each Receipt this Period

5000.00

Refund of Contribution

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

8500.00

8500.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 174 OF 202

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC**

Mailing Address 1310 G Street NW

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement  
Transfer to Affiliated PAC

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		09		2014

Transaction ID : BA2256A1C24754A299EB

Amount of Each Disbursement this Period

25000.00
----------

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

25000.00
----------

25000.00
----------

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 175 OF 202

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Brian Ellis for Congress**

Mailing Address PO BOX 6568

City  
Grand RapidsState  
MIZip Code  
49516-6568Purpose of Disbursement  
Contribution to Federal Candidate

Candidate Name

Brian Ellis

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		13		2014

Transaction ID : B65CED67AF59E49EE966

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**B. Moolenaar for Congress**

Mailing Address 5915 EASTMAN AVENUE SUITE 100

City  
MidlandState  
MIZip Code  
48640-6824Purpose of Disbursement  
Contribution to Federal Candidate

Candidate Name

John Moolenaar

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		13		2014

Transaction ID : B311471E4415C48B6B39

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**C. BENISHEK FOR CONGRESS, INC.**

Mailing Address PO BOX 2012

City  
KINGSFORDState  
MIZip Code  
49802Purpose of Disbursement  
Contribution to Federal Candidate

Candidate Name

Rep. Dan J. Benishek

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		13		2014

Transaction ID : B4FDD1736568B41EA998

Amount of Each Disbursement this Period

1000.00
---------

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

6500.00
---------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 176 OF 202

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Rudy Hobbs for Congress**

Mailing Address PO BOX 442056

City Detroit	State MI	Zip Code 48244-2056
-----------------	-------------	------------------------

Purpose of Disbursement  
Contribution to Federal Candidate

Candidate Name

Rudy Hobbs

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District: 14

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		21		2014

Transaction ID : BA3C83A36D42A4F5A890

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. DEBBIE DINGELL FOR CONGRESS**

Mailing Address PO BOX 746

City Dearborn	State MI	Zip Code 48121-0746
------------------	-------------	------------------------

Purpose of Disbursement  
Contribution to Federal Candidate

Candidate Name

Debbie Dingell

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		12		2014

Transaction ID : BF1C2152CE81747ADA66

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**C. Brian Ellis for Congress**

Mailing Address PO BOX 6568

City Grand Rapids	State MI	Zip Code 49516-6568
----------------------	-------------	------------------------

Purpose of Disbursement  
Contribution to Federal Candidate

Candidate Name

Brian Ellis

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		13		2014

Transaction ID : B6B4750FFB87E4A508A5

Amount of Each Disbursement this Period

2000.00
---------

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3500.00
---------

--



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 177 OF 202

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Levin For Congress Committee**

Mailing Address P.O. Box 1092

City  
WarrenState  
MIZip Code  
48092Purpose of Disbursement  
Contribution to Federal Candidate

Candidate Name

Rep. Sandy M. Levin

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		18		2014

Transaction ID : B3C1B261D17AC447DB00

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. BRENDA LAWRENCE FOR CONGRESS**

Mailing Address PO BOX 3060

City  
SouthfieldState  
MIZip Code  
48037-3060Purpose of Disbursement  
Contribution to Federal Candidate

Candidate Name

Brenda Lawrence

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District: 14

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		13		2014

Transaction ID : BC49C58957AF74DBCB57

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. KIRK FOR SENATE**

Mailing Address P.O. BOX 8

City  
WinnetkaState  
ILZip Code  
60093-0008Purpose of Disbursement  
Contribution to Federal Candidate

Candidate Name

Sen. Mark Steven Kirk

Office Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2014

Transaction ID : B5018745BC0A4488380D

Amount of Each Disbursement this Period

1000.00
---------

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3000.00
---------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 178 OF 202

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Friends of Dan Kildee**

Mailing Address PO Box 248

City Flint	State MI	Zip Code 48501
---------------	-------------	-------------------

Purpose of Disbursement  
Contribution to Federal Candidate

Candidate Name

Rep. Dan T. Kildee

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		18		2014

Transaction ID : B2BE5A6D33B4A4AA69D2

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Mike Bishop for Congress**

Mailing Address PO BOX 1148

City Brighton	State MI	Zip Code 48116-2748
------------------	-------------	------------------------

Purpose of Disbursement  
Contribution to Federal Candidate

Candidate Name

Mike Bishop

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		13		2014

Transaction ID : B16B45C612B014ED4A44

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**C. Hansen Clarke for Congress**

Mailing Address 1448 Woodward Ave., #305

City Detroit	State MI	Zip Code 48226
-----------------	-------------	-------------------

Purpose of Disbursement  
Contribution to Federal Candidate

Candidate Name

Hansen Clarke

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		03		2014

Transaction ID : B78DB77F9CAC443D985B

Amount of Each Disbursement this Period

1000.00
---------

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

4500.00
---------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 179 OF 202

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. HUIZENGA FOR CONGRESS**

Mailing Address 441 WILLIAM COURT

City	State	Zip Code
ZEELAND	MN	49464

Purpose of Disbursement  
Contribution to Federal Candidate

Candidate Name

Rep. Bill P. Huizenga

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		28		2014

Transaction ID : BCE8CDC6273AA4EF2B37

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**B. Michigan Republican Party - Fedral Acct.**

Mailing Address 520 Seymour St.

City	State	Zip Code
Lansing	MI	48933

Purpose of Disbursement  
Contribution to Federal Candidate

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Other2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		10		2014

Transaction ID : B984A7CFBFD994E23A0B

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**C. CONTINUING A MAJORITY PARTY ACTION COMMITTEE (CAMPAC)**

Mailing Address 5915 Eastman Avenue Suite 100

City	State	Zip Code
Midland	MI	48640

Purpose of Disbursement  
Contribution to Federal PAC

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Other2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		09		2014

Transaction ID : B9A4BC7F0258A4458846

Amount of Each Disbursement this Period

5000.00
---------

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

12500.00
----------

--

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 180 OF 202

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Democratic Senatorial Campaign Committee**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		12		2014

Mailing Address 120 Maryland Ave Ne

**Transaction ID : BF7621EC272C641DEBBF**

City	State	Zip Code
Washington	DC	20002

Amount of Each Disbursement this Period

Purpose of Disbursement  
Contribution to Federal PACCategory/  
Type

5000.00

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼
Other2014

State: District:

Full Name (Last, First, Middle Initial)

**B. National Republican Congressional Commit**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2014

Mailing Address 320 First St. Se

**Transaction ID : B8394043EE52043B9AAB**

City	State	Zip Code
Washington	DC	20003

Amount of Each Disbursement this Period

Purpose of Disbursement  
Contribution to Federal CandidateCategory/  
Type

2500.00

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼
Other2014

State: District:

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Mailing Address

Amount of Each Disbursement this Period

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7500.00

37500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 181 OF 202

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Moving Michigan Forward**

Mailing Address 4025 Timberland Dr SE

City  
Grand RapidsState  
MIZip Code  
49508Purpose of Disbursement  
Contribution to State Independent PAC

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		23		2014

Transaction ID : B5CBB086B4A41488BBD9

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**B. CTE Virgil Smith State Senator**

Mailing Address 20445 Sheffield

City  
DetroitState  
MIZip Code  
48221Purpose of Disbursement  
Virgil Smith, State Senate, 4th District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : B738E985B1B2F4F68A4C

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Bill Rogers For State Representative**

Mailing Address 4878 Pine Eagles Ct

City  
BrightonState  
MIZip Code  
48116Purpose of Disbursement  
Bill Rogers, State House, 66th District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		22		2014

Transaction ID : BE4C342DCE81F4E6F96A

Amount of Each Disbursement this Period

500.00
--------

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4000.00
---------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 182 OF 202

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Burton Leland For Detroit**

Mailing Address 17254 Bentler

City	State	Zip Code
Detroit	MI	48219

Purpose of Disbursement  
Contribution to Local Candidate

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District: Other2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		15		2014

Transaction ID : B06F256C140BC4ECD853

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**B. Committee to Elect Brian Banks**

Mailing Address PO Box 15644

City	State	Zip Code
Detroit	MI	48215-0644

Purpose of Disbursement  
Brian Banks, State House, 1st District, MI

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		03		2014

Transaction ID : B2A71D10EEE31416796C

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**C. Tom Leonard for State Representative**

Mailing Address 14840 Robinwood Drive

City	State	Zip Code
Lansing	MI	48906-9230

Purpose of Disbursement  
Tom Leonard, State House, 93rd District, MI

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		16		2014

Transaction ID : B12AEE8667C0440B2A43

Amount of Each Disbursement this Period

500.00
--------

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00
---------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 183 OF 202

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Frank Foster for House**

Mailing Address PO Box 452

City	State	Zip Code
Pellston	MI	49769

Purpose of Disbursement  
Frank Foster, State House, 107th District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		29		2014

Transaction ID : B9054C6D3606D4F4A846

Amount of Each Disbursement this Period

300.00
--------

Full Name (Last, First, Middle Initial)

**B. Friends of Sean McCann**

Mailing Address PO Box 50811

City	State	Zip Code
Kalamazoo	MI	49008

Purpose of Disbursement  
Sean McCann, State House, 60th District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		23		2014

Transaction ID : B997E546C8F414C9592B

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**C. CTE Rob VerHeulen**

Mailing Address 4167 Imperial

City	State	Zip Code
Walker	MI	49534-3483

Purpose of Disbursement  
Rob VerHeulen, State House, 74th District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		23		2014

Transaction ID : BE9ABECB1E5D04CDEB9

Amount of Each Disbursement this Period

1000.00
---------

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1800.00
---------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 184 OF 202

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Committee To Elect Andrew J Kandrevas**

Mailing Address 13400 Dix-toledo Road

City	State	Zip Code
Southgate	MI	48195

Purpose of Disbursement  
Andrew Kandrevas, State House, 13th District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	13	/	2014

Transaction ID : B2DCBEEDFB1294313806

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**B. Committee to Elect Peter MacGregor**

Mailing Address 8209 Vista Royale Lane

City	State	Zip Code
Rockford	MI	49341

Purpose of Disbursement  
Peter MacGregor, State House, 73rd District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	13	/	2014

Transaction ID : BB7A0B7F3341942B09D1

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**C. Committee to Elect Mike Shirkey State Senate**

Mailing Address 11757 SUTFIN RD

City	State	Zip Code
Clarklake	MI	49234-9628

Purpose of Disbursement  
Mike Shirkey, State Senate, 16th District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	13	/	2014

Transaction ID : B5D743ECE108E4206A8E

Amount of Each Disbursement this Period

1000.00
---------

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3500.00
---------

--



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 185 OF 202

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Adam Zemke for State Representative**

Mailing Address PO box 8147

City	State	Zip Code
Ann Arbor	MI	48107-8147

Purpose of Disbursement  
Adam Zemke, State House, 55th District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		23		2014

Transaction ID : B32D0297D4B5244C9A49

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**B. Friends of Phil Phelps**

Mailing Address 1021 KENSINGTON AVE

City	State	Zip Code
Flint	MI	48503-5311

Purpose of Disbursement  
Phil Phelps, State House, 49th District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		23		2014

Transaction ID : B9F413F62FAF4449D81D

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Committee to Elect Klint Keston**

Mailing Address PO Box 1193

City	State	Zip Code
Walled Lake	MI	48390-5193

Purpose of Disbursement  
Klint Kesto, State House, 39th District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		23		2014

Transaction ID : B6E2183B77C36476B868

Amount of Each Disbursement this Period

1000.00
---------

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2500.00
---------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 186 OF 202

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Jim Stamas for State Senate**

Mailing Address 5915 EASTMAN AVE SUITE 100

City	State	Zip Code
Midland	MI	48640-6824

Purpose of Disbursement  
Jim Stamas, State Senate, 36th District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	20	/	2014

Transaction ID : BACE5F364CAF843CE8AA

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Ben Glardon for State Representative**

Mailing Address PO Box 1746

City	State	Zip Code
Owosso	MI	48867

Purpose of Disbursement  
Ben Glardon, State House, 85th District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	04	/	2014

Transaction ID : B1EE815D39F6B4B34996

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**C. Vincent Gregory for Senate**

Mailing Address 29501 Red Leaf Dr

City	State	Zip Code
Southfield	MI	48076

Purpose of Disbursement  
Vincent Gregory, State Senate, 14th District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	30	/	2014

Transaction ID : B6286A6C1C9F0476D8A3

Amount of Each Disbursement this Period

1000.00
---------

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2500.00
---------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 187 OF 202

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Mike McCready for State Rep**

Mailing Address 1011 S. Adams Road

City	State	Zip Code
Birmingham	MI	48009-7022

Purpose of Disbursement  
Contribution to State Independent PAC

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

☐ Primary
☐ General
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	18	/	2014

Transaction ID : BEC102676B2B243FB868

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Phil Pavlov for State Senate**

Mailing Address 4126 Yankee Road

City	State	Zip Code
St. Clair	MI	48079

Purpose of Disbursement  
Phil Pavlov, State Senate, 25th District, MI

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

☐ Primary
☐ General
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	07	/	2014

Transaction ID : B1678CCBBA2164F809E0

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Committee to Elect Kurt Heise**

Mailing Address PO Box 70212

City	State	Zip Code
Plymouth	MI	48170

Purpose of Disbursement  
Kurt Heise, State House, 20th District, MI

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

☐ Primary
☐ General
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	07	/	2014

Transaction ID : B78D1A8FB07764138870

Amount of Each Disbursement this Period

1000.00
---------

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3000.00
---------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 188 OF 202

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Friends of Phil Phelps**

Mailing Address 1021 KENSINGTON AVE

City

State

Zip Code

Flint

MI

48503-5311

Purpose of Disbursement

Phil Phelps, State House, 49th district, MI

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State:

District:

Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		07		2014

Transaction ID : B656EE2DE8B964B4D99A

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**B. Citizens Supporting Mike Nofs for State Senate**

Mailing Address 5420 BECKLEY RD PMB 350

City

State

Zip Code

BATTLE CREEK

MI

49015

Purpose of Disbursement

Mike Nofs, State Senate, 19th District, MI

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State:

District:

Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		07		2014

Transaction ID : B7BC167393620479E981

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**C. Jeff Irwin for State Rep**

Mailing Address 2542 Bellwood

City

State

Zip Code

Ann Arbor

MI

48104

Purpose of Disbursement

Jeff Irwin, State House, 53rd District, MI

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State:

District:

Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		18		2014

Transaction ID : BF29C133538F64FD1A1C

Amount of Each Disbursement this Period

500.00
--------

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2250.00
---------

--

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 189 OF 202

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Marcia Hovey Wright for State Rep**

Mailing Address 452 West Webster Ave

City	State	Zip Code
Muskegon	MI	49440

Purpose of Disbursement  
Marcia Hovey Wright, State House, 92nd District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	20	/	2014

Transaction ID : B95B1B65E6F5E4365B50

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**B. Arlan Meekhof for State Senate**

Mailing Address 9128 Oak Creek Lane

City	State	Zip Code
West Olive	MI	49460

Purpose of Disbursement  
Arlan Meekhof, State Senate, 30th District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	23	/	2014

Transaction ID : B0AADFB8810074377AFF

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Stacy Erwin Oakes for Senate**

Mailing Address PO BOX 1584

City	State	Zip Code
Saginaw	MI	48605-1584

Purpose of Disbursement  
Stacy Erwin Oakes, State House, 32nd District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	05	/	2014

Transaction ID : B8D51AE35519B4B70B15

Amount of Each Disbursement this Period

500.00
--------

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2000.00
---------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 190 OF 202

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Joseph Graves for State Representative**

Mailing Address 16316 Knobhill

City	State	Zip Code
Linden	MI	48451

Purpose of Disbursement  
Joseph Graves, State House, 51st District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		29		2014

Transaction ID : B81CA6EAB03324E0C9F0

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Charles Smiley for State Rep**

Mailing Address 2253 McLaren

City	State	Zip Code
Burton	MI	48529

Purpose of Disbursement  
Charles Smiley, State House, 50th District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		01		2014

Transaction ID : BB635A9C5CAD04F9EB49

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**C. Wayne Schmidt for State Senate**

Mailing Address PO BOX 25

City	State	Zip Code
Traverse City	MI	49685-0025

Purpose of Disbursement  
Wayne Schmidt, State Senate, 37th District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : B1E90DFEC30A248FD965

Amount of Each Disbursement this Period

1200.00
---------

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2700.00
---------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 191 OF 202

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Aric Nesbitt for State Representative**

Mailing Address PO Box 400

City	State	Zip Code
Lawton	MI	49065

Purpose of Disbursement  
Aric Nesbitt, State House, 66th District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		12		2014

Transaction ID : BDE2C6D3C71484D20BA2

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Rick Jones For State Senate**

Mailing Address P O Box 115

City	State	Zip Code
Grand Ledge	MI	48837

Purpose of Disbursement  
Rick Jones, State Senate, 24th District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		07		2014

Transaction ID : B5D85DE419C48494095C

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**C. Frank Foster for House**

Mailing Address PO Box 452

City	State	Zip Code
Pellston	MI	49769

Purpose of Disbursement  
Frank Foster, State House, 107th District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		21		2014

Transaction ID : B1C1474CBDC77479188B

Amount of Each Disbursement this Period

2500.00
---------

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4000.00
---------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 192 OF 202

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Committee to Elect Michael Webber Representative**

Mailing Address PO BOX 70461

City	State	Zip Code
Rochester Hills	MI	48307-0010

Purpose of Disbursement
Michael Webber, State House, 45th District, MI

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		11		2014

Transaction ID : BFDF590361C7F46768E0

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**B. Ken Yonker for State Rep**

Mailing Address 8300 Patterson Ave SE

City	State	Zip Code
Caledonia	MI	49316

Purpose of Disbursement
Ken Yonker, State House, 72th District, MI

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		23		2014

Transaction ID : B9782489D604F465B8A6

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Committee to Elect Bert Johnson State Senate**

Mailing Address 36 Eason

City	State	Zip Code
Highland Park	MI	48203

Purpose of Disbursement
Bert Johnson, State Senate, 2nd District, MI

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		21		2014

Transaction ID : BA88A62D42E3F4F0D938

Amount of Each Disbursement this Period

1000.00
---------

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2500.00
---------

--



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 193 OF 202

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Citizens for Margaret OBrien**

Mailing Address 1625 Bellaire

City	State	Zip Code
Portage	MI	49024

Purpose of Disbursement  
Margaret OBrien, State House, 61st District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	23	/	2014

Transaction ID : B3FD7AE215E1E46318D9

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Citizens Supporting Mike Nofs for State Senate**

Mailing Address 5420 BECKLEY RD PMB 350

City	State	Zip Code
BATTLE CREEK	MI	49015

Purpose of Disbursement  
Mike Nofs, State Senate, 19th District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	13	/	2014

Transaction ID : B026A6464F7FB415BB35

Amount of Each Disbursement this Period

700.00
--------

Full Name (Last, First, Middle Initial)

**C. Goeff Hansen for Senate**

Mailing Address PO Box 167

City	State	Zip Code
Hart	MI	49420

Purpose of Disbursement  
Goef Hansen, State Senate, 34th District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	06	/	2014

Transaction ID : B0CC5962AB9E94B9A8CC

Amount of Each Disbursement this Period

1000.00
---------

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2700.00
---------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 194 OF 202

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Joe Hune For State Senate**

Mailing Address 4849 Hogback Rd

City	State	Zip Code
Fowlerville	MI	48836

Purpose of Disbursement  
Joe Hune, State Senate, 22nd District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	18	/	2014

Transaction ID : BB6EBD1421AEC4965B2D

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Committee To Elect Matt Lori State Repre**

Mailing Address 14941 Roberts Shores Drive

City	State	Zip Code
Constantine	MI	49042

Purpose of Disbursement  
Matt Lori, State House, 59th District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	06	/	2014

Transaction ID : B02206978D42F47B1829

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**C. Friends of Pam Faris**

Mailing Address 4116 Orme Circle

City	State	Zip Code
Clio	MI	48420-8527

Purpose of Disbursement  
Pam Faris, State House, 48th district, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	07	/	2014

Transaction ID : BBD91A41B109148BE96E

Amount of Each Disbursement this Period

1250.00
---------

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2750.00
---------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 195 OF 202

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Friends of Kathy S Crawford**

Mailing Address 46275 ELEVEN MILE RD

City	State	Zip Code
Novi	MI	48374-2417

Purpose of Disbursement  
Kathy Crawford, State House, 38th District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2014

Transaction ID : BD0EE003920C946D19AA

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**B. Al Pscholka for State Rep**

Mailing Address 5810 Longhorn Trail

City	State	Zip Code
Stevensville	MI	49127

Purpose of Disbursement  
Al Pscholka, State House, 79th District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2014

Transaction ID : B7BB123C3C1854190B43

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Ananich Future Fund**

Mailing Address 932 Maxine Street

City	State	Zip Code
Flint	MI	48503

Purpose of Disbursement  
Contribution to State Independent PAC

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2014

Transaction ID : BBB33180701A0405A843

Amount of Each Disbursement this Period

1000.00
---------

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2500.00
---------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 196 OF 202

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Committee to Elect Ken Goike**

Mailing Address 22440 32 Mile

City	State	Zip Code
Ray	MI	48096

Purpose of Disbursement  
Ken Goike, State House, 33rd District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	06	/	2014

Transaction ID : B819F2748F3A54490B1C

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Citizens Supporting Tory Rocca**

Mailing Address 12481 Starlite Court

City	State	Zip Code
Sterling Heights	MI	48312

Purpose of Disbursement  
Tory Rocca, State Senate, 10th District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	21	/	2014

Transaction ID : BFC76169D7D6043CE883

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**C. Committee to Elect Edward J Canfield**

Mailing Address 933 E MAIN ST

City	State	Zip Code
Sebewaing	MI	48759-1636

Purpose of Disbursement  
Edward Canfield, State House, 84th District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	10	/	2014

Transaction ID : B7142CEBB1EBD49CDB21

Amount of Each Disbursement this Period

500.00
--------

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2000.00
---------

--



	21b		22		23		24		25		26
	27		28a		28b		28c		X 29		30b

Blue Cross Blue Shield of Michigan PAC

Category/  
Type

20000.00

State:  District:  Michigan2014

Category/  
Type

250.00

State:  District:  Michigan2014

Category/  
Type

20000.00

State:  District:  Michigan2014

40250.00

\_\_\_\_\_

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 199 OF 202

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Senate Democratic Fund**

Mailing Address P.o. Box 111

City	State	Zip Code
Lansing	MI	48909

Purpose of Disbursement  
Contribution to State Independent PAC

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		28		2014

Transaction ID : BB2848BEB416B4410AA5

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**B. Whitmer Leadership PAC**

Mailing Address PO Box 11063

City	State	Zip Code
Lansing	MI	48901

Purpose of Disbursement  
Contribution to State Independent PAC

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		13		2014

Transaction ID : BB1CCED3223CC471F84D

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**C. Michigan Values Leadership Fund**

Mailing Address 201 Townsend

City	State	Zip Code
Lansing	MI	48933

Purpose of Disbursement  
Contribution to State Independent PAC

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		16		2014

Transaction ID : BB61576A4C4854A10AD1

Amount of Each Disbursement this Period

500.00
--------

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

6000.00
---------

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 200 OF 202

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Committee to Elect Dave Pagel - 78th State Rep**

Mailing Address 3221 E Shawnee Road

City	State	Zip Code
Berrien Springs	MI	49103-9762

Purpose of Disbursement  
Dave Pagel, State House, 78th District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		01		2014

Transaction ID : BF337AB1B086A4753B91

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**B. Kowall Majority Fund**

Mailing Address 208 N CAPITOL AVE FLOOR 3

City	State	Zip Code
Lansing	MI	48933-1356

Purpose of Disbursement  
Contribution to State Independent PAC

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		24		2014

Transaction ID : B9BF90B256DFB456E846

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**C. Bill Lavoy for State Representative**

Mailing Address 724 Saint Anne Lane

City	State	Zip Code
Monroe	MI	48162-3548

Purpose of Disbursement  
Bill LaVoy, State House, 17th District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		01		2014

Transaction ID : B642BC220B20D489B8AC

Amount of Each Disbursement this Period

500.00
--------

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3000.00
---------

--



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 201 OF 202

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

Full Name (Last, First, Middle Initial)

**A. Committee to Elect John Kivela**

Mailing Address PO Box 224

City  
MarquetteState  
MIZip Code  
49855-0224Purpose of Disbursement  
John Kivela, State House, 109th District, MI

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		21		2014

Transaction ID : B6E5262284DAD4BA3A21

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**B. Richardville Leadership Fund**

Mailing Address PO Box 1631

City  
MonroeState  
MIZip Code  
48161Purpose of Disbursement  
Contribution to State Independent PAC

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		13		2014

Transaction ID : B0595BD40BD7C4CC283D

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**C. Vision for Victory**

Mailing Address PO BOX 1189

City  
Mount PleasantState  
MIZip Code  
48804-1189Purpose of Disbursement  
Contribution to State Independent PAC

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: Michigan2014

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		30		2014

Transaction ID : BFEE241B0A7634F06967

Amount of Each Disbursement this Period

500.00
--------

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2750.00
---------

--

	21b		22		23		24		25		26
	27		28a		28b		28c		X 29		30b

# Blue Cross Blue Shield of Michigan PAC

M M / D D / Y Y Y Y  
05 29 2014

Category/  
Type

1000.00

Disbursement For: 2014

☐ Primary      ☐ General

☒ Other (specify) ▼

Michigan2014

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

1000.00

102200.00